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103d Congress — 1st Session • January 5–November 26, 1993

House Document

No. 122

FINANCIAL DISCLOSURE REPORTS
MEMBERS OF HOUSE OF REPRESENTATIVES
103d CONGRESS
JANUARY 1–DECEMBER 31, 1992
VOLUME 3 OF 3 VOLUMES

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FINANCIAL DISCLOSURE

REPORTS

OF MEMBERS OF THE U.S. HOUSE OF REPRESENTATIVES OF THE 103D CONGRESS

FOR THE PERIOD

January 1, 1992 to December 31, 1992

COMMUNICATION FROM THE CLERK OF THE HOUSE PURSUANT TO 2 U.S.C. 703(d)(1) AND RULE XLIV, CLAUSE 1 OF HOUSE RULES

(Volume 3 of 3)

JULY 23, 1993.—Referred to the Committee on Standards of Official Conduct and ordered to be printed

U.S. GOVERNMENT PRINTING OFFICE

70–599 WASHINGTON : 1993

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 13 PM 4:44
OFFICE OF
U.S. HOUSE

NICK J. RAHALL, II
(Full Name)

1801 Harper Road Beckley, West Virginia 25801
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: WV, District: Third	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED

MC (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [X]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Nick J. Rahall II	**DATE (Month, Day, Year)** May 12, 1993

2757

Reporting Individual's Name

NICK J. RAHALL, II

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	WTNJ Radio Station (my radio station)	Bonus	2,000.00

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

NICK J. RAHALL, II

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Center for Policy Analysis on Palestine	Speech	1/21/92	1,000.
Regular Common Carriers Conference	Speech	1/25/92	2,000.
National Motor Freight Association	Speech	2/24/92	2,000.
United States Tobacco	Speech	2/9-10/92	2,000.
Transportation Trades Department	Speech	2/11/92	1,000.
Smokeless Tobacco Council	Speech	5/26/92	1,000.
* Jorge Emilio Zedan	Speech	2/13/91	1,000. *
*Roberto Bukele + Peter Tannous	Speech	2/14/91	3,000.- *
* Contribution to Charity offer made in June 1992*			

This page may be copied if more space is required.

Reporting Individual's Name: NICK J. RAHALL, II

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
S, DC, JT	Examples:	B	ABC Corporation Stock		X								X									X								X
			George Wash. Credit Union Accounts			X									X									X						
			1&2 Main Street, Dover, Delaware					X						X									X							
JT	Investment Property corner of HarperRD. and Carriage Dr. Beckley, WV w/brother						X								X										X				
JT	B&R - Beckley, WV-Pt. owner w/brother bldg. and land & 7-11 in Ral. County					X								X					% of sales					X					
3 DC	Shearson, Loeb & Rhoades, Inc. Stock Broker (see #1 attached)							X					X		X	X									X				see print outs # 1
JT	Investment Bldgs. Harper Rd. Go-Mac bldg. and Cellular One (EGR Industries) Beckley. WV w/ Brother				X									X										X					
3 DC	Wheat First Securities (See # 2 Attached)						X						X			X									X				see print out # 2

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: NICK J. RAHALL, II

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
		Year End Value (X)										Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	Santa Fe Industries			X								X									X							
	First National Bank			X								X									X							
	Raleigh County National Bank			X								X									X							
	N.J. Rahall, II Trust (Edward Rahall							X				X		X	X									X				see print
	Trustee) w/ Shearson Lehman Brothers and Wheat First Securities (# 3 attached)							X				X		X	X									X				out # 3
	Electro-Nucleionics, Inc.			X										X							X							see print out
	Wheat First Securities - Broker (# 4 attached) Nick J. Rahall, II only							X				X		X	X									X				see print
	Shearson, Lehman Brothers, Inc. (Statement attached) Broker Nick J. Rahall, II only # 5)							X				X		X	X									X				out # 4 see print out # 5
	WV Broadcasting/WTNJ leased land I own to WV Broadcasting/WTNJ for antennae			X														lease of land to WTNJ for antennae						X				
JT	Hernando County, FL land w/ brother and cousins			X														Real Estate sale pending										
	Rahall Realty, Inc. (121)				X							X												X				
JT	H. L. and R. Corp. and E GR Industries (WV) 1/2 w/ brother Raleigh Co. land and money market and S.C. condo							X				X			X										X			
S DC	Mutual Funds (see # 6 attached)			X								X		X	X								X					see pring out # 6

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: NICK J. RAHALL, II

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Bank of Northern Virginia		X																									
	Hilton Head, SC Property time Sharing (2 weeks peak season)		X																									
JT	Glade Spring, Raleigh Co. WV lot(1/5 owner)		X																									
	WV Broadcasting Station WTNJ-FM Mt. Hope, WV WV Stock					X																						
	Shearson American Express, Inc. IRA Account (see printout for details#7)		X									X			X						X							see print out # 7
	Real Estate Flat Top Lake, Raleigh County, WV			X																								
JT	Louisana Hsg. Fin. Agy Mtg. Rev. Multi Fam Ten Com. w/ brother			X										X							X							
	Dean Witter Broker Acct. (see print out for details #8)					X						X												X				see print out #8

Schedule III—Continuation

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Reporting Individual's Name

NICK J. RAHALL, II

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
AND 3DC	Wheat First Securities (See attached statements # 2,3, &4) and Trust Acct. - Nick J. Rahall, II	X	X	X					X			
and 3DC	Shearson/Lehman Brothers, Inc. and Trust Acct. Nick J. Rahall, II (See attached statements # 1,3,5)	X	X	X					X			
	Shearson/Lehman Brothers IRA (See attached statements # 7)					X						
3DC	Mutual Funds (See attached statements #6)											
	Dean Witter Acct. (see attached statements #8)	X	X	X	Aug-Dec 1992				X			

Reporting Individual's Name: NICK J. RAHALL, II

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001–$15,000	C $15,001–$50,000	O $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Shearson Lehman Brothers - Stock Broker	Margin Account				X			
	E.G.R. Industries to H. L. R. Corp. brother and I own each	Notes on Hilton Head, SC condo							
		Raleigh County Property (WV)				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
WTNJ Radio Station	Sports jacket and tie	300.
Christmas gift from Staff	Gift Certificate and shirt	300.

Use additional sheets if more space is required.

Reporting Individual's Name

NICK J. RAHALL, II

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Nat. Motor Freight Traffic Assoc.	2/1-4/92	Roundtrip from Wash. DC to Ft. Lauderdale, FL (Air)	Y	Y	None	N
	United States Tobacco	2/9-10/92	Roundtrip Wash. DC to Palm Beach, FL (Charter)	Y	Y	None	N
	Continental Air Line	2/16-17/92	Roundtrip Air from Wash. DC to Houston, TX	Y	Y	None	N
	Nat. Motor Freight Traffic Assoc.	6/26-29/92	Roundtrip air from Wash. DC to Dubuque, Iowa	Y	Y	None	N
	Virginia Coal Council	10/7-8/92	Roundtrip air from Beckley WV to Norfolk, VA (Charter)	Y	Y	None	N
	Federal Express	11/16-17/92	Roundtrip air from Wash.DC to Memphis, TN	Y	Y	None	N
	Regular Common Carriers	1/25-27/92	Air Trans. from Charleston WV to Naples, FL to Wash.DC	Y	Y	None	N

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Reporting Individual's Name
NICK J. RAHALL, II

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	WV Broadcasting Corporation
Vice President and Secy.	H. L. and R. Corp. and EGR Industries
Trustee	Victoria Lynn Rahall Hassler Trust
Trustee	Mary Alice Rahall Trust
Trustee	Edward G. Rahall Trust
Trustee	Tanya Alice Rahall Tabet Trust

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1992 [illegible]

U.S. HOUSE OF REPRESENTATIVES

Form For Disclosing Gifts From Foreign Governments Pursuant To 5 U.S.C. 7342

I. NAME: Nick J. Rahall, II II. POSITION: Member

III. RECIPIENT (if other than reporting person): _____

IV. DESCRIPTION:

(1) Tangible gift(s) of more than minimal value. None

(2) Decoration(s) of more than minimal intrinsic value. None

(3) Travel provided by a Foreign Government. Round-trip transportation between Washington, D.C., and Beijing, China, including meals, lodging, and in-country transportation provided by Chinese People's Institute of Foreign Affairs.

(4) Expenses for travel provided or reimbursed by a Foreign Government. None

V. CIRCUMSTANCES JUSTIFYING ACCEPTANCE: The trip was a cultural exchange program approved by the U.S. Information Agency pursuant to the Mutual Education and Cultural Exchange Act. The program was sponsored by the Chinese People's Institute of Foreign Affairs.

VI. DATE OR DATES OF ACCEPTANCE (for travel give inclusive dates travel occurred): January 4, 1992, to January 17, 1992

VII. DONOR GOVERNMENT (if items are received from more than one Foreign Government, use additional forms: People's Republic of China

(1) Name and Position of individual who presented item: Ambassador Zhang Wenpu, Vice President of the Chinese People's Institute of Foreign Affairs

VIII. FOR TANGIBLE GIFTS OR DECORATIONS OF MORE THAN MINIMAL VALUE ONLY:

(1) Estimated value in United States at time of acceptance: _____

(2) Disposition or current location of accepted item(s). _____

RECEIVED
92 FEB -7 PM 2:37
COMMITTEE ON STANDARDS

Nick J. Rahall II
Signature

February 7, 1992
Date of this report

Re-filed 5/12/93 Nick J. Rahall II

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, D.C. 20515

January 25, 1993

The Honorable Nick J. Rahall II
U.S. House of Representatives
2269 Rayburn House Office Building
Washington, D.C. 20515

Dear Representative Rahall:

Returned with this letter is a form you filed with the Committee on Standards of Official Conduct disclosing travel you accepted from January 4-17, 1992, from the People's Republic of China.

While travel provided by a foreign government taking place entirely outside of the United States must be reported on the form you submitted, USIA-approved cultural exchange programs sponsored by foreign governments, such as the trip you took, are treated differently. *See* 5 U.S.C. § 7342(k). Thus, the trip in question should be disclosed on the Financial Disclosure Statement you will file on or before May 17, 1993, covering calendar year 1992. In addition to the information normally required, you should indicate that the trip was a USIA-approved cultural exchange so it is clear that the normal limits on foreign travel do not apply.

If you have any further questions concerning this matter, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

Bernard Raimo
Chief Counsel

Enclosure

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 25801

SS # 232-08-2218
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Account number 685-06692-16 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ 05
Money funds	28,613 21
Stocks	99,150 00
Net value this period	$ 127,763 26
Net value last period	$ 127,422 42

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 05	$ 14	$ 0.00
Dividends	72 00	138 50	0 00
Money funds earnings	118 79	162.24	0 00
Total	$ 190 84	$ 300 88	$ 0 00

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 28,422.42
Interest credited	05		
Dividends credited	72 00		
Money funds earnings reinvested	118 79		
Total	$ 190 84	$ 0 00	
Combined closing cash and money funds balance			$ 28,613 26

Cash	05
Money funds	28,613 21

#1

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-06692-16 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/28/92.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	28,613.21	$ 28,613.21	4.068%	Accrued dividends of $ 40.32
Total value of money funds		$ 28,613.21		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated Income (annualized)	Market value	Comment
AMGEN INC	OTC	150	$ 65.25			$ 9,787.50	Symbol: AMGN\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	80.75	3.417	276.00	8,075.00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	50	129.75	.184	12.00	6,487.50	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	101.25	1.58	160.00	10,125.00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	35.00	.285	20.00	7,000.00	Symbol: MCIC\Rated: B
PFIZER INC	NYSE	200	74.50	1.986	296.00	14,900.00	Symbol: PFE\Rated: A+
*** SCHLUMBERGER LTD	NYSE	100	60.00	2.00	120.00	6,000.00	Symbol: SLB\Rated: A-
WAL-MART STORES INC NEW	NYSE	600	54.00	.314	102.00	32,400.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	100	43.75	1.005	44.00	4,375.00	Symbol: WMX\Rated: A
Total value of stocks					$ 1,030.00	$ 99,150.00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/92	INTEREST ON CREDIT BALANCE AT 3.801% 1/21 THRU 2/20	$ .05			$ .05
Total interest earned		$ .05	$ 0.00		$ .05

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Account number 685-06692-16 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/03/92	BRISTOL MYERS SQUIBB CO CASH DIV ON 100 SHS RECORD 01/03/92 PAY 02/01/92	$ 69.00			$ 69.00
02/03/92	DILLARD DEPT STORES INC CL A CASH DIV ON 50 SHS RECORD 12/31/91 PAY 02/01/92	3.00			3.00
Total dividends earned		$ 72.00	$ 0.00		$ 72.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
02/14/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 01/13/92-02/17/92 36 DAYS AVERAGE YIELD 4.24 %.	$ 118.79		$ 118.79
Total earnings from money funds			$ 118.79	$ 0.00	$ 118.79

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 28,392.33
02/04/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	102.09	102.09
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	118.79	118.79
	Closing money funds balance			$ 28,613.21

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
216 MAIN STREET
BECKLEY WV 25801

MAY 29, 1992

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SHEARSON LEHMAN BROTHERS

685-06692-1-6

RECAPITULATION

	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME
CASH	72	72	.1	3.6	3
CASH EQUIVALENTS	34,833	34,830	28.1	3.5	1,219
EQUITIES	34,225	89,031	71.8	1.1	956
*** GRAND TOTAL	69,130	123,933	100.0	1.8	2,178

NOTE: THE TOTAL COST OF SECURITIES RELATES ONLY TO THOSE HELD IN THE PORTFOLIO AT THE STATEMENT DATE. THEREFORE, A COMPARISON OF COST AND MARKET VALUE IS NOT INDICATIVE OF THE PERFORMANCE OF THE ACCOUNT. THE RESULTS OF PRIOR TRANSACTIONS ARE NOT SPECIFICALLY REFLECTED HERE AND CAN BE DETERMINED ONLY BY CONSULTING HISTORICAL DATA.

THE TRADE DATE ENTRY 01-01-01 INDICATES LACK OF ORIGINAL PURCHASE INFORMATION.

MICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
216 MAIN STREET
BECKLEY WV 25801

MAY 29, 1992

662 24 1
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SHEARSON LEHMAN BROTHERS

685-06692-1-6

QUANTITY	DESCRIPTION	TRADE DATE	UNIT COST	CURRENT PRICE	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME	P/E
	** CASH **				72	72	0.1	5.6	5	
	** CASH EQUIVALENTS **									
22519.290	AMERICAN EXP= DAILY DIV FUND	01-06-92	1.000	1.000	22,519	22,519			788	
21		01-10-92	1.00	1.000	21	21				
102.090		02-04-92	1.000	1.000	102	102			5	
118		02-14-92	1.00	1.000	118	118			4	
82		03-13-92	1.00	1.000	82	82			2	
114.050		03-20-92	1.000	1.000	114	114			5	
85		04-10-92	1.00	1.000	85	85			2	
11702.680		04-24-92	1.000	1.000	11,702	11,702			409	
68		05-08-92	1.00	1.000	68	68			3	
34830.110					34,855	34,830	28.1	5.5	1,219	
	** EQUITIES **									
	-DRUGS & COSMETICS-									
150	AMGEN INC	01-01-01		0 61		9,150	7.4	0.0		72
100	BRISTOL MYERS SQUIBB CO	08-24-90	56.950	72 5/8	5,765	7,257	5.8	3.8	276	17
100	JOHNSON & JOHNSON	07-26-89	51 1/8	96 7/8	5,184	9,687	7.8	1.9	184	21
200	PFIZER INC	06-18-91	58.457	74 5/8	11,857	14,925	12.0	2.0	296	33
					22,787	41,000	33.1			
	-MERCHANDISING-									
50	DILLARD DEPT STORES INC CL A	01-30-91	88.019	124 5/8	4,469	6,231	5.0	0.2	10	21
600	WAL-MART STORES INC NEW	01-10-85	5.345	53	3,249	31,800	25.7	0.4	126	37
					7,718	38,031	30.7			
	-PUBLIC UTILITIES - COMMUNICATIONS-									
200	MCI COMMUNICATIONS CORP	01-25-79	1.437	32 1/8	287	6,425	5.2	0.3	20	15

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685-06692-1-6

MAY 29, 1992

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SHEARSON LEHMAN BROTHERS

QUANTITY	DESCRIPTION	TRADE DATE	UNIT COST	CURRENT PRICE	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME	P/E
	-MISCELLANEOUS-									
100	WASTE MANAGEMENT INC	11-14-90	33 3/4	35 3/4	3,431	3,575	2.9	1.2	44	27
					34,225	89,031	71.8	1.1	956	

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SHEARSON LEHMAN BROTHERS

SUB CLI 24

BRANCH/MANAGER - 685 248
ACCOUNT NUMBER - 685-06692
FISCAL YEAR END - 12/31
TD/SD CODE - T
TAX EXEMPT CODE - N

NICK JOE RAHALL II ACF
REBECCA ASHLEY RAHALL UGTMA/WV
216 MAIN STREET
BECKLEY WV 25801

CAPITAL GAINS

OPEN DATE	CLOSE DATE	QUANTITY	DESCRIPTION	OPEN UNIT PRICE	CLOSE UNIT PRICE	OPEN PRICE	CLOSE PRICE	IND	PROFIT/LOSS
12-05-91	04-15-92	100	*** SCHLUMBERGER LTD	63.363	58.538	6,411.36	5,778.64-		632.72-

** IND LEGEND **

SS - SHORT-SALE
TL - TECHNICAL LONG
TS - TECHNICAL SHORT
LT - LONG TERM
IN - ORDINARY INCOME

** ACCOUNT TOTALS **

TOTAL-LOSS 632.72-

CURRENT PERIOD - P&L

S/T 632.72-
L/T .00

TOTAL ORDINARY INCOME .00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

SS # 233-17-4890
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-00725-10 2-10
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ 64.13
Money funds	26,571.53
Stocks	182,037.50
Bonds	9,571.00
Net value this period	**$ 218,244.16**
Net value last period	**$ 223,818.93**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .13	$ .13	$ 0.00
Dividends	275.00	275.00	0.00
Money funds earnings	40.60	40.60	0.00
Total	$ 315.73	$ 315.73	$ 0.00

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	$ 111,112.48	*Not applicable*

Bulletin board

What's Ahead For 1992? *We believe that a "new economic order" will present unique challenges and opportunities to investors. As 1992 unfolds, will interest rates continue to fall? Will stock prices continue to rise? Ask your Financial Consultant for a copy of our new report, "Investing In The '90s: A New Economic Order 1992."*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 26,319.93
Interest credited	.13		
Dividends credited	275.00		
Money funds earnings credited	20.28		
Money funds earnings reinvested	20.32		
Total	$ 315.73	$ 0.00	
Combined closing cash and money funds balance			$ 26,635.66

Cash	64.13
Money funds	26,571.53

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/31/92.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	26,571.53	$ 26,571.53	4.675%	Accrued dividends of $ 66.60
Total value of money funds		$ 26,571.53		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	$ 38.625	3.106%	$ 360.00	$ 11,587.50	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	79.875	3.455	276.00	7,987.50	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	100	123.50	.194	24.00	12,350.00	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	107.50	1.488	160.00	10,750.00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	31.375	.318	20.00	6,275.00	Symbol: MCIC\Rated: B
MCDONALDS CORP	NYSE	300	43.50	.85	111.00	13,050.00	Symbol: MCD\Rated: A+
MERCK & CO INC	NYSE	300	157.125	1.603	756.00	47,137.50	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	73.00	2.027	148.00	7,300.00	Symbol: PFE\Rated: A+
*** SCHLUMBERGER LTD	NYSE	100	59.50	2.016	120.00	5,950.00	Symbol: SLB\Rated: A-

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-00725-10 240

Stocks *continued*

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
TYCO LABORATORIES INC	NYSE	200	$ 37.125	.969%	$ 72.00	$ 7,425.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	800	53.875	.315	136.00	43,100.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	45.625	.964	88.00	9,125.00	Symbol: WMX\Rated: A
Total value of stocks					$ 2,271.00	$ 182,037.50	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/26/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.571		$ 9,571.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,571.00	

***This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
01/21/92	INTEREST ON CREDIT BALANCE AT 3.860% 12/31 THRU 1/20	$ .13			$ .13
Total interest earned		$ .13	$ 0.00		$ .13

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/02/92	MERCK & CO INC CASH DIV ON 300 SHS RECORD 12/06/91 PAY 01/02/92	$ 189.00			$ 189.00
01/02/92	WASTE MANAGEMENT INC CASH DIV ON 200 SHS RECORD 12/23/91 PAY 01/02/92	22.00			22.00

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Account number 685-00725-10 240

Dividends *continued*

Date	Description	Taxable	Non-taxable	Comment	Amount
01/03/92	WAL-MART STORES INC NEW CASH DIV ON 800 SHS RECORD 12/11/91 PAY 01/03/92	$ 34.00			$ 34.00
01/10/92	*** SCHLUMBERGER LTD CASH DIV ON 100 SHS RECORD 12/23/91 PAY 01/10/92	30.00			30.00
Total dividends earned		$ 276.00	$ 0.00		$ 276.00

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/08/92	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND CASH DIV	$ 20.28		Credited to account	$ 20.28
01/10/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND FOR PERIOD 1/1/92 - 1/12/92 12 DAYS AVERAGE YIELD 4.74%	20.32		Reinvested	20.32
Total money funds earnings credited to account					$ 20.28
Total money funds earnings reinvested					$ 20.32
Total earnings from money funds		$ 40.60	$ 0.00		$ 40.60

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 26,288.61
01/03/92	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	244.12	244.12
01/08/92	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND EXCHANGE REDEMPTION	26,530.93	26,530.93
01/08/92	Investment	AMERICAN EXPRESS® DAILY DIVIDEND FUND	26,551.21	26,551.21
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	20.32	20.32
	Closing money funds balance			$ 26,571.93

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 38.625	$ 7,889.60	$ 11,587.50	$ 3,897.90
BRISTOL MYERS SQUIBB CO	08/24/90	100	56.93	79.875	5,765.10	7,987.50	2,222.40
DILLARD DEPT STORES INC CL A	01/30/91	100	88.019	123.50	8,874.04	12,350.00	3,475.96
JOHNSON & JOHNSON	07/26/89	100	51.125	107.50	5,184.60	10,750.00	5,565.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	31.375	287.00	6,275.00	5,988.00 #
MCDONALDS CORP	12/04/90	300	29.375	43.50	8,950.99	13,050.00	4,099.01
MERCK & CO INC	12/23/86	300	39.66	157.125	11,968.62	47,137.50	35,168.88 #
PFIZER INC	06/18/91	100	58.437	73.00	5,918.71	7,300.00	1,381.29
*** SCHLUMBERGER LTD	12/03/91	100	63.363	59.50	6,411.36	5,950.00	(461.36)
TYCO LABORATORIES INC	06/18/87	200	22.31	37.125	4,529.00	7,425.00	2,896.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	53.875	4,338.41	43,100.00	38,761.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	45.625	6,658.59	9,125.00	2,266.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	9.571	3,520.00	9,571.00	6,051.00 #
Total					$ 80,496.03	$ 191,608.50	$ 111,112.48

#Based on information supplied by your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
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Your Financial Consultant

JAMES A JOSEPH
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701 MAIN STREET
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STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-00725-10 240
As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ .10
Money funds	26,839.96
Stocks	183,462.50
Bonds	9,651.00
Net value this period	$ 219,953.56
Net value last period	$ 219,244.16

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .10	$ .23	$ 0.00
Dividends	93.00	368.00	0.00
Money funds earnings	111.30	151.90	0.00
Total	$ 204.40	$ 520.13	$ 0.00

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	$ 112,617.48	*Not applicable*

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 26,839.86
Interest credited	.10		
Dividends credited	93.00		
Money funds earnings reinvested	111.30		
Total	$ 204.40	$ 0.00	$ 26,840.06
Combined closing cash and money funds balance			

Cash	.10
Money funds	26,839.96

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-00725-10 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/28/92.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	26,839.96	$ 26,839.96	4.068%	Accrued dividends of $ 37.82
Total value of money funds		**$ 26,839.96**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	$ 43 50	2.988%	$ 390 00	$ 13,050.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	80.75	3 417	276.00	8,075 00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	100	129.75	.184	24.00	12,975 00	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	101.25	1.58	160.00	10,125 00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	35.00	.285	20.00	7,000.00	Symbol: MCIC\Rated: B
MCDONALDS CORP	NYSE	300	40.50	.913	111.00	12,150.00	Symbol: MCD\Rated: A+
MERCK & CO INC	NYSE	300	157.625	1.75	828.00	47,287.50	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	74 50	1.986	148.00	7,450 00	Symbol: PFE\Rated: A+
*** SCHLUMBERGER LTD	NYSE	100	60.00	2.00	120.00	6,000.00	Symbol: SLB\Rated: A-
TYCO LABORATORIES INC	NYSE	200	37 00	.972	72.00	7,400.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	800	54 00	.314	138.00	43,200.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	43.75	1.005	88.00	8,750.00	Symbol: WMX\Rated: A
Total value of stocks					**$ 2,373.00**	**$ 183,462.50**	

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Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds

Description	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.651		$ 9,651.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A +
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,651.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/92	INTEREST ON CREDIT BALANCE AT 3.801% 1/21 THRU 2/20	$ .10			$ .10
Total interest earned		$ .10	$ 0.00		$ .10

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/03/92	BRISTOL MYERS SQUIBB CO CASH DIV ON 100 SHS RECORD 01/03/92 PAY 02/01/92	$ 69.00			$ 69.00
02/03/92	DILLARD DEPT STORES INC CL A CASH DIV ON 100 SHS RECORD 12/31/91 PAY 02/01/92	6.00			6.00
02/03/92	TYCO LABORATORIES INC CASH DIV ON 200 SHS RECORD 01/07/92 PAY 02/03/92	18.00			18.00
Total dividends earned		$ 93.00	$ 0.00		$ 93.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-00725-10 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
02/14/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 01/13/92-02/17/92 38 DAYS AVERAGE YIELD 4.24 %.	$ 111.30		$ 111.30
Total earnings from money funds			$ 111.30	$ 0.00	$ 111.30

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 26,571 53
02/04/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	157.13	157.13
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	111 30	111.30
	Closing money funds balance			$ 26,839 96

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 43.50	$ 7,889.60	$ 13,050.00	$ 5,160.40
BRISTOL MYERS SQUIBB CO	08/24/90	100	58.93	80.75	5,765.10	8,075.00	2,309.90
DILLARD DEPT STORES INC CL A	01/30/91	100	88.019	129.75	8,874.04	12,975.00	4,100.96
JOHNSON & JOHNSON	07/26/89	100	51.125	101.25	5,184.60	10,125.00	4,940.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	35.00	287.00	7,000.00	6,713.00 #
MCDONALDS CORP	12/04/90	300	29.375	40.50	8,850.99	12,150.00	3,199.01
MERCK & CO INC	12/23/88	300	39.68	157.625	11,968.62	47,287.50	35,318.88 #
PFIZER INC	08/18/91	100	58.437	74.50	5,918.71	7,450.00	1,531.29
*** SCHLUMBERGER LTD	12/03/91	100	63.363	60.00	6,411.36	6,000.00	(411.36)
TYCO LABORATORIES INC	08/18/87	200	22.31	37.00	4,529.00	7,400.00	2,871.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	54.00	4,338.41	43,200.00	38,861.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	43.75	6,858.59	8,750.00	1,891.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	9.651	3,520.00	9,651.00	6,131.00 #
Total value					$ 80,496.02	$ 193,113.50	$ 112,617.48

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ 68.83
Money funds	39,040.53
Accrued Money Fund Dividends	64.95
Stocks	164,075.00
Bonds	9,728.00
Net value this period	**$ 212,977.31**
Net value last period	**$ 219,953.56**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 4.08	$ 4.31	$ 0.00
Dividends	202.25	570.25	0.00
Money funds earnings	84.75	236.65	0.00
Total	**$ 291.08**	**$ 811.21**	**$ 0.00**

Gain/loss summary

	This period	This year
Realized gain or (loss) - 1991	$ 596.61	*Not applicable*
Realized gain or (loss)	3,027.23	3,027.23
Unrealized gain or (loss)	102,257.97	*Not applicable*

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N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 26,840.06
Securities bought and other subtractions		0.00	
Securities sold and other additions	11,978.22		
Interest credited	4.08		
Dividends credited	202.25		
Money funds earnings reinvested	84.75		
Total	$ 12,269.30	$ 0.00	
Combined closing cash and money funds balance			$ 39,109.36

Cash	68.83
Money funds	39,040.53

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/31/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	39,040.53	$ 39,040.53	$ 64.95	3.823%	
Total value of money funds		$ 39,040.53	$ 64.95		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	44.00	2.954	390.00	13,200.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	76.25	3.619	276.00	7,625.00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	100	125.00	.192	24.00	12,500.00	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	97.50	1.641	160.00	9,750.00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	33.00	.303	20.00	6,600.00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	147.125	1.875	828.00	44,137.50	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	69.50	2.129	148.00	6,950.00	Symbol: PFE\Rated: A+
*** SCHLUMBERGER LTD	NYSE	100	55.875	2.147	120.00	5,587.50	Symbol: SLB\Rated: A-
TYCO LABORATORIES INC	NYSE	200	37.25	.966	72.00	7,450.00	Symbol: TYC\Rated: A-

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	800	53.25	.394	168.00	42,600.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	38.375	1.146	88.00	7,675.00	Symbol: WMX\Rated: A
Total value of stocks					$ 2,294.00	$ 164,075.00	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.728		$ 9,728.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,728.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
03/06/92	Sold	MCDONALDS CORP AVG PRICE SHOWN-DETAILS ON REQ	-300	$ 40.524	$ 11,978.22
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 11,978.22

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
03/23/92	INTEREST ON CREDIT BALANCE AT 4.004% 2/21 THRU 3/22	$ 4.08			$ 4.08
Total interest earned		$ 4.08	$ 0.00		$ 4.08

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N JOE RAHALL II ACF

Account number 685-00725-10 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
03/10/92	JOHNSON & JOHNSON CASH DIV ON 100 SHS RECORD 02/18/92 PAY 03/10/92	$ 40.00			$ 40.00
03/13/92	BANKAMERICA CORP CASH DIV ON 300 SHS RECORD 02/25/92 PAY 03/13/92	97.50			97.50
03/19/92	PFIZER INC CASH DIV ON 100 SHS RECORD 02/07/92 PAY 03/19/92	37.00			37.00
03/20/92	MCDONALDS CORP CASH DIV ON 300 SHS RECORD 03/02/92 PAY 03/20/92	27.75			27.75
Total dividends earned		$ 202.25	$ 0.00		$ 202.25

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
03/13/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 02/18/92-03/15/92 27 DAYS AVERAGE YIELD 3.89 %.	$ 84.75		$ 84.75
Total earnings from money funds			$ 84.75	$ 0.00	$ 84.75

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 26,839.96
03/09/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	11,978.32	11,978.32
03/16/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	137.50	137.50
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	84.75	84.75
	Closing money funds balance			$ 39,040.53

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

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Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM		11/12/91 Cancel sell	300		$ 19.625		$ -5,777.69	
AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM	08/26/86	11/12/91 Sold	300	15.04	19.625	4,512.03	5,777.69	1,265.66 #
AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM		11/12/91 Cancel sell	50		19.625		-962.95	
AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM	01/15/87	11/12/91 Sold	50	32.31	19.625	1,632.00	962.95	(669.05) #
MCDONALDS CORP AVG PRICE SHOWN-DETAILS ON REQ	12/04/90	02/28/92 Sold	300	29.375	40.524	8,950.99	11,978.22	3,027.23
Total realized gain or (loss)						$ 8,950.99	$ 11,978.22	$ 3,027.23
Total realized gain or (loss) - 1991								$ 596.61

#Based on information supplied by your Financial Consultant.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25 875	$ 44 00	$ 7,889 90	$ 13,200 00	$ 5,310 40
BRISTOL MYERS SQUIBB CO	08/24/90	100	58 93	78 25	5,765 10	7,825 00	1,859 90
DILLARD DEPT STORES INC CL A	01/30/91	100	88 018	125 00	8,874 04	12,500 00	3,625 96
JOHNSON & JOHNSON	07/26/88	100	51 125	97 50	5,184 60	9,750.00	4,565 40
MCI COMMUNICATIONS CORP	01/25/78	200	1 43	33 00	287.00	6,600.00	6,313.00 #
MERCK & CO INC	12/23/88	300	39 86	147 125	11,958 62	44,137 50	32,168 88 #
PFIZER INC	06/18/91	100	58 437	69 50	5,918 71	6,950.00	1,031.29
*** SCHLUMBERGER LTD	12/03/91	100	63 363	55 875	6,411.36	5,587.50	(823 86)
TYCO LABORATORIES INC	06/18/87	200	22 31	37 25	4,529.00	7,450.00	2,921.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	53 25	4,338.41	42,600.00	38,261.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	38.375	6,858.59	7,675.00	816.41

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Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	$ 3.52	$ 9.728	$ 3,520.00	$ 9,728.00	$ 6,208.00 #
Total value					$ 71,545.03	$ 173,803.00	$ 102,257.97

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

685-00725-240
N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Managed by: SHEARSON ASSET MANAGEMENT

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We have available at no cost an investment advisory services disclosure document which describes our products. If you would like a copy, please contact your financial consultant.

This review is not, and under no circumstances is to be construed as, an offer to sell or a solicitation to buy any securities referred to herein. Market prices, as well as acquisition and liquidation dates and values for securities are obtained from sources believed reliable but are not guar-

Manager Commentary

The combination of higher interest rates in the bond market and a moderately lower stock market after the upward spike in prices at the end of 1991 resulted in a quarter in which it was very difficult to make money.

Market participants decided in January to buy cyclicals and sell bonds and growth stocks. It quickly became the fashion. We believe that an economic recovery is developing, but we have questions about strength and durability. While we are not worried about inflation on a near-term basis, the bond market clearly is concerned about the inability of the Administration and Congress to ever do anything to bring spending under control. At these levels, though, bond rates have begun to stabilize and price/earnings ratios of the growth stocks should improve. It also seems likely that the slow business recovery will be tough on the corporate profit recovery, and that investors will have second thoughts about owning so many cyclical stocks. Those second thoughts may have already begun.

The market has undergone a full-fledged correction of last year's winners, and the momentum and sector rotation types have done their thing. We have always believed that the best mode of investing, however, is buying shares in attractive businesses at reasonable prices and we plan to stay with that approach, even if temporarily unpopular.

Apropos of that, we continue to maintain our weighting in health care stocks due to their attractive growth rates and promising product pipelines. While they have certainly been unpopular in the first quarter we look for the group to return to favor in the foreseeable future.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Investment Performance

Record of Asset Growth

	Current Quarter	Calendar Y-T-D	Trailing 12 Mos.	Since Inception 12/31/90
Beginning Asset Value	223,615.93	223,615.93	183,859.25	154,130.00
Beginning Accruals	0.00	0.00	0.00	0.00
Total Beginning Market Value	223,615.93	223,615.93	183,859.25	154,130.00
Contributions/Withdrawals	0.00	0.00	0.00	0.00
Appreciation	-11,514.78	-11,514.78	25,531.32	54,467.26
Income Earned	811.21	811.21	3,521.79	4,315.10
Ending Asset Value	212,912.36	212,912.36	212,912.36	212,912.36
Ending Accruals	0.00	0.00	0.00	0.00
Total Ending Market Value	212,912.36	212,912.36	212,912.36	212,912.36

Time - Weighted Rates of Return (%)

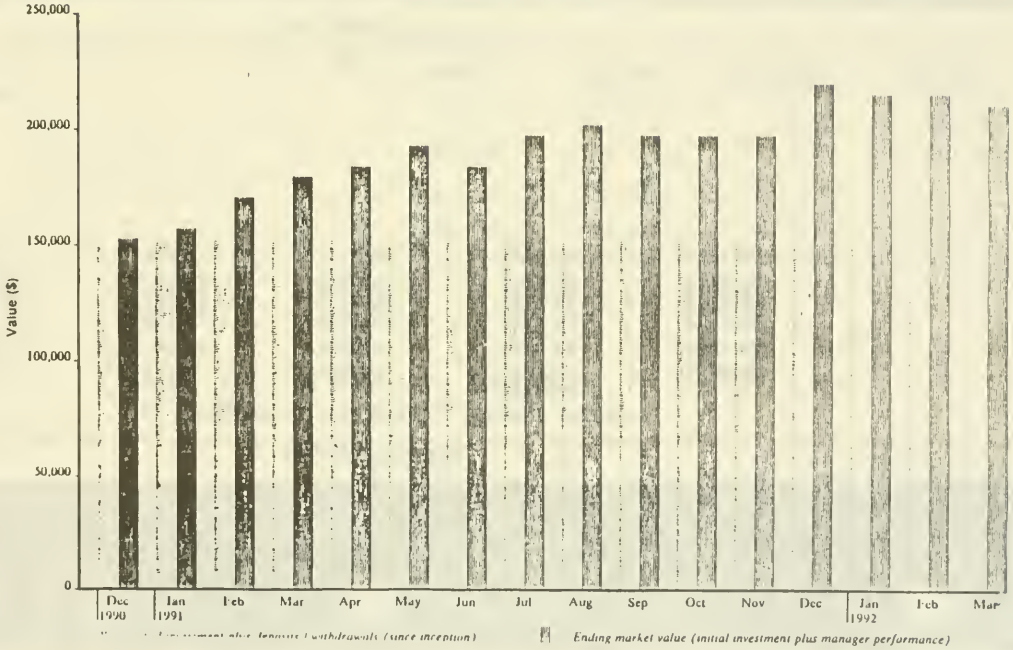
	Current Quarter	Calendar Y-T-D	Trailing 12 Mos.	Annualized since 12/31/90
Your Account	-4.79	-4.79	15.80	29.49
90-Day T-Bills	0.97	0.97	4.80	5.07
Lehman Brothers Intermediate Treasury Bonds	-1.10	-1.10	10.47	10.15
50% S&P 500/50% Lehman Brothers Intermediate Govt/Corporate Bonds	-1.70	-1.70	11.13	16.11
Standard and Poors 500 Index	-2.50	-2.50	11.01	21.23

Note: The time-weighted rates of return are measured from the start of the first full calendar month.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

The Growth of Your Portfolio



SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Growth of $100.00

(Time - Weighted Total Rates of Return, 12/31/90 = $100.00)

Quarter Ending	Total Fund	90-Day T-Bills	LB Interm T-Bonds	50% S&P500 50% IntG/C	S&P 500
12/31/90	$100.00	$100.00	$100.00	$100.00	$100.00
3/31/91	$119.28	$101.50	$102.15	$108.45	$114.60
6/30/91	$121.49	$102.85	$103.86	$109.30	$114.23
9/30/91	$130.52	$104.22	$108.80	$114.90	$120.37
12/31/91	$145.08	$105.35	$114.10	$122.61	$130.48
3/31/92	$138.13	$106.37	$112.85	$120.52	$127.21

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Asset Allocation Summary

	6/30/91	9/30/91	12/31/91	3/31/92
Equities and Related issues	84.7 %	82.9 %	84.0 %	77.1 %
Fixed Income	5.0 %	4.7 %	4.2 %	4.6 %
Cash and Equivalents	10.3 %	12.4 %	11.8 %	18.4 %
Total Portfolio	100.0 %	100.0 %	100.0 %	100.0 %

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Investment Portfolio

Quantity	Description	Date Acquired	Unit Cost	Cost	Market Price	Market Value	Pct of Tot Value	Annual Income	Current Yield
Cash and Equivalents									
Principal Cash Transactions									
68.83	CASH BALANCE			68.83		68.83	0.03		
Money Market Funds - Taxable									
39040.53	AMERICAN EXPRESS® DAILY DIVIDEND FUND		1.000	39,040.53	1.000	39,040.53	18.33	1484	3.80
Total Cash and Equivalents				39,109.36		39,109.36	18.36	1484	3.79
Fixed Income Securities									
Municipal Bonds									
100000	956630BS5-080 / 3984596 WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC OTM 11.0%-RG 00.000 % Due 01/01/2015 Accrued Interest: N/A Rated by Moody's: A1 S&P: A+ Call at 103.00 On 01/01/1993	9/01/83	3.520	3,520.00	9.728	9,728.00	4.56		
Total Fixed Income Securities				3,520.00		9,728.00	4.56		
100000	total par value with a weighted average maturity of			0.76 years.					
Equities and Equity Related Securities									
Common Stocks									
300	BANKAMERICA CORP	1/21/91	26.298	7,889.60	44.000	13,200.00	6.19	390	2.95
100	BRISTOL MYERS SQUIBB CO	8/24/90	57.651	5,765.10	76.250	7,625.00	3.58	276	3.62
100	DILLARD DEPT STORES INC CL A	1/30/91	88.740	8,874.04	125.000	12,500.00	5.87	24	0.19
100	JOHNSON & JOHNSON	7/26/89	51.846	5,184.60	97.500	9,750.00	4.57	160	1.64
200	MCI COMMUNICATIONS CORP	1/25/79	1.437	287.42	33.000	6,600.00	3.09	20	0.30
300	MERCK & CO INC	12/23/86	39.895	11,968.60	147.125	44,137.50	20.73	828	1.88
100	PFIZER INC	6/18/91	59.187	5,918.71	69.500	6,950.00	3.26	148	2.13
100	zzz SCHLUMBERGER LTD	12/03/91	64.113	6,411.36	55.875	5,587.50	2.62	120	2.15

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Investment Portfolio

Quantity	Description	Date Acquired	Unit Cost	Cost	Market Price	Market Value	Pct of Tot Value	Annual Income	Current Yield
200	TYCO LABORATORIES INC	6/18/87	22.648	4,529.67	37.250	7,450.00	3.49	72	0.97
800	WAL-MART STORES INC NEW	1/18/85	5.423	4,338.60	53.250	42,600.00	20.00	168	0.39
200	WASTE MANAGEMENT INC	11/14/90	34.292	6,858.59	38.375	7,675.00	3.60	88	1.15
Total Common Stocks				68,026.29		164,075.00	77.06	2294	1.40
Total Equities and Equity Related Securities				68,026.29		164,075.00	77.06	2294	1.40
Total Portfolio				110,655.65		212,912.36	100.00	3778	1.77

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Year-to-Date Realized Gains & Losses

Quantity	Description	Date Opened	Date Closed	Proceeds	Cost	Short-Term Gain/Loss	Long-Term Gain/Loss
300	MCDONALDS CORP	12/04/90	2/28/92	11,978.22	8,950.99		3,027.23
Total				11,978.22	8,950.99	0.00	3,027.23

**Settlement of this sale occurred in 1992 and is included on the 1099 report for 1991 sent to the IRS.

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Dividends and Interest Received

	Date	Quantity	Description	Amount
Cash Equivalent				
	1/06/92		AMERICAN EXPRESS● GOVERNMENT AND AGENCIES FUND	20.28
	1/10/92		AMERICAN EXPRESS● DAILY DIVIDEND FUND	20.32
	2/14/92		AMERICAN EXPRESS● DAILY DIVIDEND FUND	111.30
	3/13/92		AMERICAN EXPRESS● DAILY DIVIDEND FUND	84.75
Subtotal				236.65
Fixed Income				
	1/21/92		INTEREST ON CREDIT BALANCE	0.13
	2/21/92		INTEREST ON CREDIT BALANCE	0.10
	3/23/92		INTEREST ON CREDIT BALANCE	4.08
Subtotal				4.31
Equity				
	1/02/92		MERCK & CO INC	189.00
	1/02/92		MASTA MANAGEMENT INC	22.00
	1/03/92		WAL-MART STORES INC NEW	34.00
	1/10/92		*** SCHLUMBERGER LTD	30.00
	2/03/92		BRISTOL MYERS SQUIBB CO	69.00
	2/03/92		DILLARD DEPT STORES INC CL A	6.00
	2/03/92		TYCO LABORATORIES INC	18.00
	3/10/92		JOHNSON & JOHNSON	40.00
	3/13/92		BANKAMERICA CORP	97.50
	3/19/92		PFIZER INC	37.00
	3/20/92		MCDONALDS CORP	27.75
Subtotal				570.25
Total				811.21

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
300	MCDONALDS CORP	29.836	8,950.99	39.93	11,978.22	3,027.23	2/28/92
Total			8,950.99		11,978.22	3,027.23	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Money funds		$ 45,303.08
Accrued money fund dividends		73.77
Stocks		156,662.50
Bonds		9,766.00
Net value this period		$ 211,805.33
Net value last period	$ 212,977.31	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 29	$ 4.60	$ 0.00
Dividends	301.00	871.25	0.00
Money funds earnings	113.77	350.42	0.00
Total	$ 415.06	$ 1,226.27	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	($ 632.72)	$ 2,394.51
Unrealized gain or (loss)	101,294.83	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 39,109 36
Securities bought and other subtractions		0.00	
Securities sold and other additions	5,778.64		
Interest credited	.29		
Dividends credited	301 00		
Money funds earnings reinvested	113 77		
Total	$ 6,193 70	$ 0 00	
Combined closing cash and money funds balance			$ 45,303 06

Money funds 45,303.06

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	45,303.06	$ 45,303.06	$ 73.77	3.727%	
Total value of money funds		$ 45,303 06	$ 73.77		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	45 125	2 88	390 00	13,537 50	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	74 375	3 71	276 00	7,437 50	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	100	119 25	201	24 00	11,925 00	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	94 875	1 939	184 00	9,487 50	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	33 375	.299	20 00	6 675 00	Symbol: MCIC\Rated; B
MERCK & CO INC	NYSE	300	145 00	1 903	828 00	43,500 00	Symbol: MRK\Rated. A+
PFIZER INC	NYSE	100	71 50	2 069	148 00	7,150 00	Symbol: PFE\Rated: A+
TYCO LABORATORIES INC	NYSE	200	36.375	989	72 00	7,275 00	Symbol: TYC\Rated: A-

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SHEARSON LEHMAN BROTHERS

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	800	52.25	.401	168.00	41,800.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	39.375	1.117	88.00	7,875.00	Symbol: WMX\Rated: A
Total value of stocks					$ 2,198.00	$ 156,662.50	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.766		$ 9,766.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,766.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
04/23/92	Sold	*** SCHLUMBERGER LTD AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 58.53817000	-100	$ 58.538	$ 5,778.64
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 5,778.64

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
04/21/92	INTEREST ON CREDIT BALANCE	AT 3.916% 3/23 THRU 4/20	$ .29		$ .29
Total interest earned			$ .29	$ 0.00	$ .29

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
04/01/92	MERCK & CO INC	CASH DIV ON 300 SHS RECORD 03/06/92 PAY 04/01/92	$ 207.00		$ 207.00
04/02/92	WAL-MART STORES INC NEW	CASH DIV ON 600 SHS RECORD 03/23/92 PAY 04/02/92	42.00		42.00
04/02/92	WASTE MANAGEMENT INC	CASH DIV ON 200 SHS RECORD 03/18/92 PAY 04/02/92	22.00		22.00
04/03/92	*** SCHLUMBERGER LTD	CASH DIV ON 100 SHS RECORD 03/02/92 PAY 04/03/92	30.00		30.00
Total dividends earned			$ 301.00	$ 0.00	$ 301.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
04/10/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 03/16/92-04/12/92 28 DAYS AVERAGE YIELD 3.79 %.	$ 113.77		$ 113.77
Total earnings from money funds			$ 113.77	$ 0.00	$ 113.77

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 39,040.53
04/02/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	275.83	275.83
04/24/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	5,872.93	5,872.93
04/24/92	Investment	AMERICAN EXPRESS® DAILY DIVIDEND FUND	5,872.93	5,872.93
04/24/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	5,872.93	-5,872.93
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	113.77	113.77
	Closing money funds balance			$ 45,303.06

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
*** SCHLUMBERGER LTD AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 58.53817000	12/03/91	04/15/92 Sold	100	$ 63.363	$ 58.538	$ 6,411.36	$ 5,778.64	($ 632.72)
Total realized gain or (loss)						$ 6,411.36	$ 5,778.64	($ 632.72)

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 45.125	$ 7,889.60	$ 13,537.50	$ 5,647.90
BRISTOL MYERS SQUIBB CO	08/24/90	100	58.93	74.375	5,765.10	7,437.50	1,672.40
DILLARD DEPT STORES INC CL A	01/30/91	100	88.019	119.25	8,874.04	11,925.00	3,050.96
JOHNSON & JOHNSON	07/26/89	100	51.125	94.875	5,184.60	9,487.50	4,302.90
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	33.375	287.00	6,675.00	6,388.00 #
MERCK & CO INC	12/23/86	300	39.68	145.00	11,968.62	43,500.00	31,531.38 #
PFIZER INC	08/18/91	100	58.437	71.50	5,918.71	7,150.00	1,231.29
TYCO LABORATORIES INC	06/18/87	200	22.31	38.375	4,529.00	7,275.00	2,746.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	52.25	4,338.41	41,800.00	37,461.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	39.375	6,858.59	7,875.00	1,016.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	9.766	3,520.00	9,766.00	6,246.00 #
Total value					$ 65,133.67	$ 166,428.50	$ 101,294.83

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ 93.80
Money funds	45,421.13
Accrued money fund dividends	92.41
Stocks	158,887.50
Bonds	9,889.00
Net value this period	**$ 214,383.84**
Net value last period	**$ 211,805.33**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .80	$ 5.40	$ 0.00
Dividends	93.00	964.25	0.00
Money funds earnings	118.07	468.49	0.00
Total	**$ 211.87**	**$ 1,438.14**	**$ 0.00**

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 2,394.51
Unrealized gain or (loss)	103,642.83	*Not applicable*

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SHEARSON LEHMAN BROTHERS

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 45,303 06
Interest credited	.80		
Dividends credited	93 00		
Money funds earnings reinvested	118 07		
Total	$ 211 87	$ 0.00	
Combined closing cash and money funds balance			$ 45,614 93

Cash	93 80
Money funds	45,421.13

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/29/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	45,421.13	$ 45,421.13	$ 92.41	3.559%	
Total value of money funds		$ 45,421.13	$ 92.41		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	45 75	2 841	390.00	13,725.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	72 375	3 813	276.00	7,237.50	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	100	124 625	.192	24.00	12,462 50	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	100	96 875	1.899	184.00	9,687.50	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	32 125	.311	20.00	6,425.00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	300	151 125	.608	276.00	45,337 50	Stock split pending Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	74 625	1 963	148 00	7,462 50	Symbol: PFE\Rated: A+
TYCO LABORATORIES INC	NYSE	200	35 00	1.028	72.00	7,000.00	Symbol: TYC\Rated: A-

Stocks
continued

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	800	53.00	.396	168.00	42,400.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	35.75	1.23	88.00	7,150.00	Symbol: WMX\Rated: A
Total value of stocks					$ 1,646.00	$ 158,887.50	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.889		$ 9,889.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,889.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
05/21/92	INTEREST ON CREDIT BALANCE	AT 3.668% 4/21 THRU 5/20	$ .80		$ .80
Total interest earned			$ .80	$ 0.00	$ .80

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
05/01/92	BRISTOL MYERS SQUIBB CO	CASH DIV ON 100 SHS RECORD 04/03/92 PAY 05/01/92	$ 69.00		$ 69.00
05/01/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 100 SHS RECORD 03/31/92 PAY 05/01/92	6.00		6.00
05/04/92	TYCO LABORATORIES INC	CASH DIV ON 200 SHS RECORD 04/07/92 PAY 05/04/92	18.00		18.00
Total dividends earned			$ 93.00	$ 0.00	$ 93.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Consolidated Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
05/08/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 04/13/92-05/10/92 28 DAYS AVERAGE YIELD 3.64 %.	$ 118.07		$ 118.07
Total earnings from money funds			$ 118.07	$ 0.00	$ 118.07

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 45.75	$ 7,889.60	$ 13,725.00	$ 5,835.40
BRISTOL MYERS SQUIBB CO	08/24/90	100	56.93	72.375	5,765.10	7,237.50	1,472.40
DILLARD DEPT STORES INC CL A	01/30/91	100	88.019	124.625	8,874.04	12,462.50	3,588.46
JOHNSON & JOHNSON	07/26/89	100	51.125	96.875	5,184.60	9,687.50	4,502.90
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	32.125	287.00	6,425.00	6,138.00 #
MERCK & CO INC	12/23/86	300	39.68	151.125	11,968.62	45,337.50	33,368.88 #
PFIZER INC	06/18/91	100	58.437	74.625	5,918.71	7,462.50	1,543.79
TYCO LABORATORIES INC	06/18/87	200	22.31	35.00	4,529.00	7,000.00	2,471.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	53.00	4,338.41	42,400.00	38,061.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	35.75	6,858.59	7,150.00	291.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83 CBLE	09/01/83	100,000	3.52	9.889	3,520.00	9,889.00	6,369.00 #
Total value					$ 65,133.87	$ 168,776.50	$ 103,642.63

#Based on information supplied by your Financial Consultant.

SHEARSON ASSET MANAGEMENT

GERALD T. ROLFE
VICE CHAIRMAN

June 15, 1992

Mr Nick Joe Rahall II
703 Woodlawn Avenue
Beckley, W VA 25801

Dear Mr Rahall,

We are pleased to enclose the portfolio summary of May 31, 1992. The first half of 1992 has been difficult for portfolios which were well positioned in 1991. Participants have so far been more interested in investing for economic recovery than in concerning themselves with the recovery's potential lack of vigor.

The spring season is often the moment of truth for an economic recovery. That moment has arrived, and seems to give credibility to our view that the recovery would be slow in comparison to those of past cycles. Both housing and autos are proceeding at relatively slow rates after their initial lift-off from sub-basement levels.

With the evidence seemingly accumulating that the pace of recovery will not threaten rising inflation, bonds should become more popular. They offer very high returns in relation to prospective inflation and to short-term interest rates. But a major rally in bonds may require less political uncertainty. If and as long term rates decline, investors will worry less about the stock market being overpriced. They will also become attracted again to growth stocks, especially given greater risk of earnings disappointments in cyclical stocks.

With the Dow Jones Index near an all-time high, it may surprise you to learn that forty percent of stocks this year are down thirty percent or more. Growth stocks dropped 4% in the first quarter vs. a 5% rise in so-called value stocks. Big cap growth stocks are now selling at the lowest P/E premium to the S&P 500 in seven years. Currently, drug stocks sell at below market P/E multiples on 1993 prospects, yet have growth and financial characteristics twice as attractive as the average S&P 500 stock. It is frustrating to wait, but that is what we shall do.

Please let me know if you have any questions or comments

Cordially,

SHEARSON LEHMAN BROTHERS INC.

TWO WORLD TRADE CENTER
NEW YORK, NY 10048
212 298 6119

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

MAY 29, 1992

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SHEARSON LEHMAN BROTHERS

685-00725-1-0

RECAPITULATION

	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME
CASH	93	93		3.6	3
CASH EQUIVALENTS	45,421	45,418	21.2	3.5	1,589
TAX-EXEMPT BONDS	3,520	9,766	4.6		
EQUITIES	61,614	158,887	74.2	1.4	2,194
*** GRAND TOTAL	110,648	214,164	100.0	1.6	3,786

NOTE: THE TOTAL COST OF SECURITIES RELATES ONLY TO THOSE HELD IN THE PORTFOLIO AT THE STATEMENT DATE. THEREFORE, A COMPARISON OF COST AND MARKET VALUE IS NOT INDICATIVE OF THE PERFORMANCE OF THE ACCOUNT. THE RESULTS OF PRIOR TRANSACTIONS ARE NOT SPECIFICALLY REFLECTED HERE AND CAN BE DETERMINED ONLY BY CONSULTING HISTORICAL DATA.

THE TRADE DATE ENTRY 01-01-01 INDICATES LACK OF ORIGINAL PURCHASE INFORMATION.

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20510

MAY 29, 1992

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SHEARSON LEHMAN BROTHERS

685-00725-1-0

QUANTITY	DESCRIPTION	TRADE DATE	UNIT COST	CURRENT PRICE	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME	P/E
	** CASH **				93	93	0.0	3.6	3	
	** CASH EQUIVALENTS **									
20678.280	AMERICAN EXPR DAILY DIV FUND	01-06-92	1.000	1.000	20,678	20,678			723	
20		01-10-92	1.00	1.000	20	20				
157.130		02-04-92	1.000	1.000	157	157			5	
111		02-14-92	1.00	1.000	111	111			3	
11970.320		03-09-92	1.000	1.000	11,970	11,970			419	
84		03-13-92	1.00	1.000	84	84			2	
137.500		03-16-92	1.000	1.000	137	137			4	
275.830		04-02-92	1.000	1.000	275	275			9	
113		04-10-92	1.00	1.000	113	113			3	
11745.860		04-24-92	1.000	1.000	11,745	11,745			411	
110		05-08-92	1.00	1.000	110	110			4	
45418.920					45,421	45,418	21.2	3.5	1,589	
	** TAX-EXEMPT BONDS **									
100,000	WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/20/83-CBLE DUE 01/01/2015 CALL DT 01/01/98,PRICE 103.000	09-01-83	3.520	9.766	3,520	9,766	4.6	0.0		
	** EQUITIES **									
	-BANKS-									
300	BANKAMERICA CORP	01-21-91	25 7/8	45 3/4	7,889	13,725	6.4	2.8	390	9.6
	-DRUGS & COSMETICS-									
100	BRISTOL MYERS SQUIBB CO	08-24-90	56.930	72 3/8	5,768	7,237	3.4	3.8	276	17
100	JOHNSON & JOHNSON	07-26-89	51 1/8	96 7/8	5,184	9,687	4.5	1.9	184	21
900	MERCK & CO INC	12-23-86	13.222	50 3/8	11,968	45,337	21.2	1.8	828	26

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

685-00725-1-0

MAY 29, 1992

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SHEARSON LEHMAN BROTHERS

QUANTITY	DESCRIPTION	TRADE DATE	UNIT COST	CURRENT PRICE	TOTAL COST	MARKET VALUE	% OF TOTAL	CURR YIELD	EST. ANNUAL INCOME	P/E
100	PFIZER INC	06-18-91	58.437	74 5/8	5,918	7,462	5.5	2.0	148	35
					28,837	69,725	52.6			
	-ELECTRONICS-									
200	TYCO LABORATORIES INC	06-18-87	22.512	35	4,529	7,000	5.3	1.0	72	16
	-MERCHANDISING-									
100	DILLARD DEPT STORES INC CL A	01-30-91	68.019	124 5/8	8,874	12,462	5.6	0.2	20	21
800	WAL-MART STORES INC NEW	01-18-85	5.345	53	4,338	42,400	19.8	0.4	168	37
					13,212	54,862	25.6			
	-PUBLIC UTILITIES - COMMUNICATIONS-									
200	MCI COMMUNICATIONS CORP	01-25-79	1.437	32 1/8	287	6,425	3.0	0.3	20	15
	-MISCELLANEOUS-									
200	WASTE MANAGEMENT INC	11-14-90	33 3/4	35 3/4	6,850	7,150	3.3	1.2	88	27
					61,614	158,887	74.2	1.4	2,194	

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CLIENT 062 SHEARSON LEHMAN BROTHERS INC ** CAPITAL GAINS REPORT ** DATE 05/29/92 PAGE . 2

SHEARSON LEHMAN BROTHERS

SUB CLI 24

BRANCH/MANAGER - 685 240
ACCOUNT NUMBER - 685-00725
FISCAL YEAR END - 12/31
TD/SD CODE - T
TAX EXEMPT CODE - N

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515

CAPITAL GAINS

OPEN DATE	CLOSE DATE	QUANTITY	DESCRIPTION	OPEN UNIT PRICE	CLOSE UNIT PRICE	OPEN PRICE	CLOSE PRICE	IND	PROFIT/LOSS
12-03-91	04-15-92	100	*** SCHLUMBERGER LTD	63.363	58.538	6,411.36	5,778.64-		632.72-
12-04-90	02-28-92	300	MCDONALDS CORP	29 3/8	40.524	8,950.99	11,978.22-	LT	3,027.23

** IND LEGEND **

SS - SHORT-SALE
TL - TECHNICAL LONG
TS - TECHNICAL SHORT
LT - LONG TERM
IN - ORDINARY INCOME

** ACCOUNT TOTALS **

TOTAL PROFIT 2,394.51

CURRENT PERIOD - P&L

S/T 632.72-
L/T 3,027.23

TOTAL ORDINARY INCOME .00

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

June 30, 1992

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance		$ 10.27
Money funds		45,848.88
Accrued money fund dividends		89.84
Stocks		154,037.50
Bonds		9,974.00
Net value this period		**$ 209,840.47**
Net value last period	$ 214,383.84	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .27	$ 5.67	$ 0.00
Dividends	190.50	1,154.75	0.00
Money funds earnings	153.43	621.92	0.00
Total	**$ 344.20**	**$ 1,782.34**	**$ 0.00**

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 2,394.51
Unrealized gain or (loss)	98,877.83	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preliminary Client Statement

June 30, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 45,814.93
Securities bought and other subtractions		0.00	
Securities sold and other additions	0.00		
Interest credited	.27		
Dividends credited	190.50		
Money funds earnings reinvested	153.43		
Total	$ 344.20	$ 0.00	
Combined closing cash and money funds balance			$ 45,859.13

Cash	10.27
Money funds	45,848.86

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	45,848.86	$ 45,848.86	$ 69.84	3.497%	
Total value of money funds		$ 45,848.86	$ 69.84		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	44.375	2.929	390.00	13,312.50	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	100	65.875	4.189	276.00	6,587.50	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	300	36.875	.218	24.00	11,062.50	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	44.75	2.055	184.00	8,950.00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	32.125	.311	20.00	6,425.00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	48.75	1.887	828.00	43,875.00	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	73.00	2.027	148.00	7,300.00	Symbol: PFE\Rated: A+
TYCO LABORATORIES INC	NYSE	200	34.00	1.058	72.00	6,800.00	Symbol: TYC\Rated: A-

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preliminary Client Statement
June 1, 1992 - June 30, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	800	53.75	.39	168.00	43,000.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	33.625	1.546	104.00	6,725.00	Symbol: WMX\Rated: A
Total value of stocks					$ 2,214.00	$ 154,037.50	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	9.974		$ 9,974.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 9,974.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
06/02/92	Stk split	MERCK & CO INC STK SPLIT ON 0000300 SHS	600		$ 0.00
06/15/92	Stk split	DILLARD DEPT STORES INC CL A STK SPLIT ON 0000100 SHS	200		0.00
06/17/92	Stk split	JOHNSON & JOHNSON STK SPLIT ON 0000100 SHS	100		0.00
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 0.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Business Cash Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
06/22/92	INTEREST ON CREDIT BALANCE	AT 3.700% 5/21 THRU 6/21	$ .27		$ .27
Total interest earned			$ .27	$ 0.00	$ .27

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/09/92	JOHNSON & JOHNSON	CASH DIV ON 100 SHS RECORD 05/19/92 PAY 06/09/92	$ 46.00		$ 46.00
06/12/92	BANKAMERICA CORP	CASH DIV ON 300 SHS RECORD 05/22/92 PAY 06/12/92	97.50		97.50
06/18/92	PFIZER INC	CASH DIV ON 100 SHS RECORD 05/15/92 PAY 06/18/92	37.00		37.00
06/19/92	MCI COMMUNICATIONS CORP	CASH DIV ON 200 SHS RECORD 05/29/92 PAY 06/19/92	10.00		10.00
Total dividends earned			$ 190.50	$ 0.00	$ 190.50

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
06/12/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 05/11/92-06/14/92 35 DAYS AVERAGE YIELD 3.52 %.	$ 153.43		$ 153.43
Total earnings from money funds			$ 153.43	$ 0.00	$ 153.43

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 45,421.13
06/10/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	139.60	139.60

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Money funds activity *continued*

Date	Activity	Description	Quantity	Amount
08/19/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	134.50	$ 134.50
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	153.43	153.43
	Closing money funds balance			$ 46,848.86

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/81	300	$ 25.875	$ 44.375	$ 7,869.60	$ 13,312.50	$ 5,422.90
BRISTOL MYERS SQUIBB CO	08/24/90	100	56.93	65.875	5,765.10	6,587.50	822.40
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	36.875	8,874.04	11,062.50	2,188.46
JOHNSON & JOHNSON	07/26/89	200	25.582	44.75	5,184.60	8,950.00	3,765.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	32.125	287.00	6,425.00	6,138.00 #
MERCK & CO INC	12/23/86	900	13.22	48.75	11,968.62	43,875.00	31,906.38 #
PFIZER INC	06/18/91	100	58.437	73.00	5,918.71	7,300.00	1,381.29
TYCO LABORATORIES INC	06/18/87	200	22.31	34.00	4,529.00	6,800.00	2,271.00 #
WAL-MART STORES INC NEW	01/18/85	800	5.34	53.75	4,338.41	43,000.00	38,661.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	33.625	6,858.59	6,725.00	(133.59)
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	9.974	3,520.00	9,974.00	6,454.00 #
Total value					$ 65,133.67	$ 164,011.50	$ 98,877.83

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

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685-00725-240
N JOE RAHALL II ACF
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WASHINGTON DC 20515-0008

Managed by: SHEARSON ASSET MANAGEMENT

We have available at no cost investment advisory services disclosure documents which describe our investment advisory services and those of any investment advisors managing your account

This review is not, and under no circumstances is to be construed as, an offer to sell or a solicitation to buy any securities referred to herein. Market prices, as well as acquisition and liquidation dates and values for securities are obtained from sources believed reliable but are not guar- No representation is made as to this review's absolute accuracy or completeness

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Investment Performance

Record of Asset Growth

	Current Quarter	Calendar Y-T-D	Trailing 12 Mos.	Since Inception 12/31/90
Beginning Asset Value	212,912.36	223,615.93	187,256.50	154,138.00
Beginning Accruals	0.00	0.00	0.00	0.00
Total Beginning Market Value	212,912.36	223,615.93	187,256.50	154,130.00
Contributions/Withdrawals	0.00	0.00	0.00	0.00
Appreciation	-4,012.86	-15,527.64	18,925.33	50,454.40
Income Earned	971.13	1,782.34	3,688.80	5,286.23
Ending Asset Value	209,870.63	209,870.63	209,870.63	209,870.63
Ending Accruals	0.00	0.00	0.00	0.00
Total Ending Market Value	209,870.63	209,870.63	209,870.63	209,870.63

Time - Weighted Rates of Return (%)

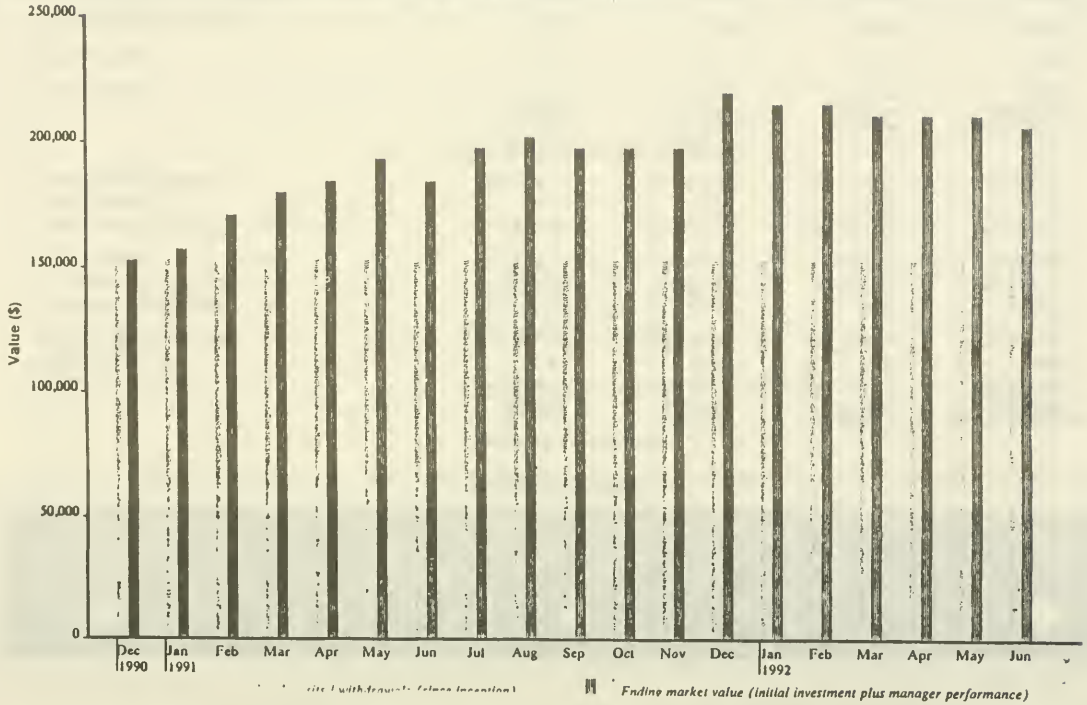
	Current Quarter	Calendar Y-T-D	Trailing 12 Mos.	Annualized since 12/31/90
Your Account	-1.43	-6.15	12.08	22.85
90-Day T-Bills	0.89	1.87	4.34	4.82
Lehman Brothers Intermediate Treasury Bonds	3.89	2.75	12.88	11.18
50% S&P 500/50% Lehman Brothers Intermediate Govt/Corporate Bonds	2.92	1.16	13.49	15.45
Standard and Poors 500 Index	1.84	-0.71	13.41	18.84

Note: The time-weighted rates of return are measured from the start of the first full calendar month.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

The Growth of Your Portfolio



SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Growth of $100.00

(Time - Weighted Total Rates of Return, 12/31/90 = $100.00)

Quarter Ending	Total Fund	90-Day T-Bills	LB Interm T-Bonds	50% S&P500 50% IntG/C	S&P 500
12/31/90	$100.00	$100.00	$100.00	$100.00	$100.00
3/31/91	$119.28	$101.50	$102.15	$108.45	$114.60
6/30/91	$121.49	$102.85	$103.86	$109.30	$114.23
9/30/91	$130.52	$104.22	$108.80	$114.90	$120.37
12/31/91	$145.08	$105.35	$114.10	$122.61	$130.48
3/31/92	$138.13	$106.37	$112.85	$120.52	$127.21
6/30/92	$136.16	$107.32	$117.24	$124.04	$129.55

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Asset Allocation Summary

	9/30/91	12/31/91	3/31/92	6/30/92
Equities and Related issues	82.9 %	84.0 %	77.1 %	73.4 %
Fixed Income	4.7 %	4.2 %	4.6 %	4.8 %
Cash and Equivalents	12.4 %	11.8 %	18.4 %	21.9 %
Total Portfolio	100.0 %	100.0 %	100.0 %	100.0 %

Investment Portfolio

Quantity	Description	Date Acquired	Unit Cost	Cost	Market Price	Market Value	Pct of Tot Value	Annual Income	Current Yield
Cash and Equivalents									
Principal Cash Transactions									
10.27	CASH BALANCE			10.27		10.27	0.00		
Money Market Funds - Taxable									
45848.86	AMERICAN EXPRESS® DAILY DIVIDEND FUND		1.000	45,848.86	1.000	45,848.86	21.84	1596	3.48
Total Cash and Equivalents				45,859.13		45,859.13	21.85	1596	3.48
Fixed Income Securities									
Municipal Bonds									
100000	956630BS5-080 / 3984596 WEST VIRGINIA HSG DEV FD SFMR 0-CPN-4ERA APPREC CTM 11.0X-RG 00.000 % Due 01/01/2015 Accrued Interest: N/A Rated by Moody: A1 S&P: A+ Call at 103.00 On 01/01/1993	9/01/83	3.520	3,520.00	9.974	9,974.00	4.75		
Total Fixed Income Securities				3,520.00		9,974.00	4.75		
100000	total par value with a weighted average maturity of 0.51 years.								
Equities and Equity Related Securities									
Common Stocks									
Banks									
300	BANKAMERICA CORP	1/21/91	26.298	7,889.60	44.375	13,312.50	6.34	390	2.93
Drugs & Cosmetics									
100	BRISTOL MYERS SQUIBB CO	8/24/90	57.651	5,765.10	65.875	6,587.50	3.13	276	4.19
200	JOHNSON & JOHNSON	7/26/89	25.923	5,184.60	44.750	8,950.00	4.26	184	2.06
900	MERCK & CO INC	12/23/86	13.298	11,968.60	48.750	43,875.00	20.90	828	1.89
100	PFIZER INC	6/18/91	59.187	5,918.71	73.000	7,300.00	3.47	148	2.03
Subtotal Drugs & Cosmetics				28,837.01		66,712.50	31.78	1436	2.15

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Investment Portfolio

Quantity	Description	Date Acquired	Unit Cost	Cost	Market Price	Market Value	Pct of Tot Value	Annual Income	Current Yield
Electronics									
200	TYCO LABORATORIES INC	6/18/87	22.648	4,529.67	34.000	6,800.00	3.24	72	1.06
Merchandising									
300	DILLARD DEPT STORES INC CL A	1/30/91	29.580	8,874.04	36.875	11,062.50	5.27	24	0.22
800	WAL-MART STORES INC NEW	1/18/85	5.423	4,338.60	53.750	43,000.00	20.48	168	0.39
Subtotal Merchandising				13,212.64		54,062.50	25.75	192	0.36
Public Utilities-Communication									
200	MCI COMMUNICATIONS CORP	1/25/79	1.437	287.42	32.125	6,425.00	3.06	20	0.31
Miscellaneous									
200	WASTE MANAGEMENT INC	11/14/90	34.292	6,858.59	33.625	6,725.00	3.20	104	1.55
Total Common Stocks				61,614.93		154,037.50	73.39	2214	1.44
Total Equities and Equity Related Securities				61,614.93		154,037.50	73.39	2214	1.44
Total Portfolio				110,994.06		209,870.63	100.00	3810	1.82

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Year-to-Date Realized Gains & Losses

Quantity	Description	Date Opened	Date Closed	Proceeds	Cost	Short-Term Gain/Loss	Long-Term Gain/Loss
300	MCDONALDS CORP	12/04/90	2/28/92	11,978.22	8,950.99		3,027.23
100	*** SCHLUMBERGER LTD	12/03/91	4/15/92	5,778.64	6,411.36	-632.72	
Total				17,756.86	15,362.35	-632.72	3,027.23

***Settlement of this sale occurred in 1992 and is included on the 1099 report for 1991 sent to the IRS.*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Dividends and Interest Received

	Date	Quantity	Description	Amount
Cash Equivalent				
	4/10/92		AMERICAN EXPRESS® DAILY DIVIDEND FUND	113.77
	5/08/92		AMERICAN EXPRESS® DAILY DIVIDEND FUND	118.07
	6/12/92		AMERICAN EXPRESS® DAILY DIVIDEND FUND	153.43
Subtotal				385.27
Fixed Income				
	4/21/92		INTEREST ON CREDIT BALANCE	0.29
	5/21/92		INTEREST ON CREDIT BALANCE	0.80
	6/22/92		INTEREST ON CREDIT BALANCE	0.27
Subtotal				1.36
Equity				
	4/01/92		MERCK & CO INC	207.00
	4/02/92		WAL-MART STORES INC NEW	42.00
	4/02/92		WASTE MANAGEMENT INC	22.00
	4/03/92		*** SCHLUMBERGER LTD	30.00
	5/01/92		BRISTOL MYERS SQUIBB CO	69.00
	5/01/92		DILLARD DEPT STORES INC CL A	6.00
	5/04/92		TYCO LABORATORIES INC	18.00
	5/02/92	600	MERCK & CO INC	
	6/09/92		JOHNSON & JOHNSON	46.00
	6/12/92		BANKAMERICA CORP	97.50
	6/15/92	200	DILLARD DEPT STORES INC CL A	
	6/17/92	100	JOHNSON & JOHNSON	
	6/18/92		PFIZER INC	37.00
	6/19/92		MCI COMMUNICATIONS CORP	10.00
Subtotal				584.50
Total				971.13

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Sales

Quantity	Description	Unit Cost	Total Cost	Unit Proceeds	Total Proceeds	Gain/ Loss	Date of Sale
Common Stocks							
100	xxx SCHLUMBERGER LTD	64.113	6,411.36	57.79	5,778.64	-632.72	4/15/92
Total			6,411.36		5,778.64	-632.72	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT
SHEARSON ASSET MGMT ADVISORY

Account value

Money funds	$ 59,131.11
Accrued money fund dividends	98.49
Stocks	147,812.50
Bonds	10,282.00
Net value this period	$ 217,324.10
Net value last period	$ 209,940.47

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .14	$ 5.81	$ 0.00
Dividends	275.00	1,429.75	0.00
Money funds earnings	121.06	742.98	0.00
Total	$ 396.20	$ 2,178.54	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 2,581.68	$ 4,976.19
Unrealized gain or (loss)	103,254.93	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 45,859 13
Securities bought and other subtractions		0.00	
Securities sold and other additions	12,875.78		
Interest credited	.14		
Dividends credited	275.00		
Money funds earnings reinvested	121.06		
Total	$ 13,271 98	$ 0.00	
Combined closing cash and money funds balance			$ 59,131 11

Money funds 59,131.11

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	59,131.11	$ 59,131.11	$ 98.49	3.299%	
Total value of money funds		$ 59,131.11	$ 98.49		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	$ 45 25	2 872%	$ 390.00	$ 13,575.00	Symbol: BAC\Rated: B-
DILLARD DEPT STORES INC CL A	NYSE	300	37 825	212	24 00	11,287.50	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	49 25	1 868	184 00	9,850 00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	33 75	296	20 00	6,750 00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	51 875	1 927	900 00	46,687 50	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	78 375	1.888	148.00	7,837.50	Symbol: PFE\Rated: A+

2883

2883

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	800	$ 55.875	.575%	$ 168.00	$ 44,700.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	35.625	1.459	104.00	7,125.00	Symbol: WMX\Rated: A
Total value of stocks					$ 1,938.00	$ 147,812.50	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11 0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.282		$ 10,282.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,282.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/21/92	Sold	BRISTOL MYERS SQUIBB CO	-100	$ 66.375	$ 6,562.29
07/21/92	Sold	TYCO LABORATORIES INC	-200	32.125	6,313.49
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 12,875.78

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
07/21/92	INTEREST ON CREDIT BALANCE	AT 3.420% 6/22 THRU 7/20	$ .14		$ .14
Total interest earned			$ .14	$ 0.00	$ .14

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N JOE RAHALL II ACF

Account number 885-00725-10 240

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
07/01/92	MERCK & CO INC	CASH DIV ON 900 SHS RECORD 06/08/92 PAY 07/01/92	$ 207.00		$ 207.00
07/02/92	WASTE MANAGEMENT INC	CASH DIV ON 200 SHS RECORD 06/17/92 PAY 07/02/92	26.00		26.00
07/06/92	WAL-MART STORES INC NEW	CASH DIV ON 600 SHS RECORD 06/15/92 PAY 07/03/92	42.00		42.00
Total dividends earned			$ 275.00	$ 0.00	$ 275.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
07/10/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 06/15/92-07/12/92 28 DAYS AVERAGE YIELD 3.44 %.	$ 121.06		$ 121.06
Total earnings from money funds			$ 121.06	$ 0.00	$ 121.06

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 45,848.86
07/02/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	217.27	217.27
07/22/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	12,943.92	12,943.92
07/22/92	Investment	AMERICAN EXPRESS® DAILY DIVIDEND FUND	12,943.92	12,943.92
07/22/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	12,943.92	-12,943.92
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	121.06	121.06
	Closing money funds balance			$ 59,131.11

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
BRISTOL MYERS SQUIBB CO	08/24/90	07/14/92 Sold	100	$ 58.93	$ 68.375	$ 5,765.10	$ 6,562.29	$ 797.19
TYCO LABORATORIES INC	08/18/87	07/14/92 Sold	200	22.31	32.125	4,529.00	6,313.49	1,784.49 #
Total realized gain or (loss)						$ 10,294.10	$ 12,875.78	$ 2,581.68

#Based on information supplied by your Financial Consultant.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 45.25	$ 7,889.60	$ 13,575.00	$ 5,685.40
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	37.625	8,874.04	11,287.50	2,413.46
JOHNSON & JOHNSON	07/26/89	200	25.562	49.25	5,184.60	9,850.00	4,665.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	33.75	287.00	6,750.00	6,463.00 #
MERCK & CO INC	12/23/86	900	13.22	51.875	11,968.62	46,687.50	34,718.88 #
PFIZER INC	06/18/91	100	58.437	78.375	5,918.71	7,837.50	1,918.79
WAL-MART STORES INC NEW	01/18/85	800	5.34	55.875	4,338.41	44,700.00	40,361.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	35.625	6,858.59	7,125.00	266.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/26/83-CBLE	09/01/83	100,000	3.52	10.282	3,520.00	10,282.00	6,762.00 #
Total value					$ 54,839.57	$ 158,094.50	$ 103,254.93

#Based on information supplied by your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
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SUITE 100
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717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT
SHEARSON ASSET MGMT ADVISORY

Account value

Cash balance	$ 94.28
Money funds	59,301.54
Accrued money fund dividends	77.04
Stocks	143,687.50
Bonds	10,285.00
Net value this period	$ 213,445.36
Net value last period	$ 217,324.19

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ 1.28	$ 7.09	$ 0.00
Dividends	93.00	1,522.75	0.00
Money funds earnings	170.43	913.41	0.00
Total	$ 264.71	$ 2,443.25	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 4,976.19
Unrealized gain or (loss)	99,132.93	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Portfolio Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

Combined opening cash and money funds balance			**$ 59,131.11**
	Amounts added	Amounts subtracted	
Interest credited	1 28		
Dividends credited	93.00		
Money funds earnings reinvested	170 43		
Total	$ 264 71	$ 0.00	
Combined closing cash and money funds balance			**$ 59,395 82**

Cash	94 28
Money funds	59,301 54

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	59,301.54	$ 59,301.54	$ 77.04	3.177%	
Total value of money funds		**$ 59,301.54**	**$ 77.04**		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	300	$ 42 875	3 032%	$ 390 00	$ 12,862 50	Symbol: BAC\Rated: B-
DILLARD DEPT STORES INC CL A	NYSE	300	34 875	229	24 00	10,462 50	Symbol: DDS\Rated: A +
JOHNSON & JOHNSON	NYSE	200	49 375	1 863	184 00	9,875 00	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	33 375	299	20 00	6,675 00	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	48 625	2 056	900 00	43,762 50	Symbol: MRK\Rated: A +
PFIZER INC	NYSE	100	77 25	1 915	148 00	7,725 00	Symbol: PFE\Rated: A +
WAL MART STORES INC NEW	NYSE	800	57 125	367	168 00	45,700 00	Symbol: WMT\Rated: A +
WASTE MANAGEMENT INC	NYSE	200	33 125	1 569	104 00	6,625 00	Symbol: WMX\Rated: A
Total value of stocks					**$ 1,938.00**	**$ 143,687.50**	

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Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.285		$ 10,285.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,285.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.*

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
08/21/92	INTEREST ON CREDIT BALANCE	AT 3.159% 7/21 THRU 8/20	$ 1.28		$ 1.28
Total interest earned			$ 1.28	$ 0.00	$ 1.28

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
08/03/92	BRISTOL MYERS SQUIBB CO	CASH DIV ON 100 SHS RECORD 07/03/92 PAY 08/01/92	$ 69.00		$ 69.00
08/03/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 300 SHS RECORD 06/30/92 PAY 08/03/92	6.00		6.00
08/03/92	TYCO LABORATORIES INC	CASH DIV ON 200 SHS RECORD 07/07/92 PAY 08/03/92	18.00		18.00
Total dividends earned			$ 93.00	$ 0.00	$ 93.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
08/14/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 07/13/92-08/16/92 35 DAYS AVERAGE YIELD 3.21 %.	$ 170.43		$ 170.43
Total earnings from money funds			$ 170.43	$ 0.00	$ 170.43

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 42.875	$ 7,889.60	$ 12,862.50	$ 4,972.90
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	34.875	8,874.04	10,462.50	1,588.46
JOHNSON & JOHNSON	07/26/89	200	25.562	49.375	5,184.60	9,875.00	4,690.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	33.375	287.00	6,675.00	6,388.00 #
MERCK & CO INC	12/23/86	900	13.22	48.625	11,968.62	43,762.50	31,793.88 #
PFIZER INC	06/18/91	100	58.437	77.25	5,918.71	7,725.00	1,806.29
WAL-MART STORES INC NEW	01/18/85	800	5.34	57.125	4,338.41	45,700.00	41,361.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	33.125	6,858.59	6,625.00	(233.59)
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/26/83-CBLE	09/01/83	100,000	3.52	10.285	3,520.00	10,285.00	6,765.00 #
Total value					$ 54,839.57	$ 153,972.50	$ 99,132.93

#Based on information supplied by your Financial Consultant.

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September 1 - September 30, 1992

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
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Your Financial Consultant

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717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT
SHEARSON ASSET MGMT ADVISORY

Account value

Cash balance	$ .18
Money funds	59,719.28
Accrued money fund dividends	84.52
Stocks	142,562.50
Bonds	10,063.00
Net value this period	$ 212,429.48

Bulletin board

Research Rankings Are Now On Your Statement.
As an added service, the research rankings of all common stocks followed by our analysts are featured in the Portfolio details section of your statement. Definitions of rankings appear on the back of the statement. For more information on our highly rated equity research, contact your Financial Consultant.

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ .18	$ 7.27	$ 0.00
Dividends	180.50	1,703.25	0.00
Money funds earnings	142.97	1,056.38	0.00
Total	$ 323.65	$ 2,766.90	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 4,976.19
Unrealized gain or (loss)	97,785.93	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Private Client Statement

September 1 - September 30, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 59,395.82
Interest credited	.18		
Dividends credited	180.50		
Money funds earnings reinvested	142.97		
Total	$ 323.65	$ 0.00	
Combined closing cash and money funds balance			$ 59,719.47

Cash	.18
Money funds	59,719.29

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	59,719.29	$ 59,719.29	$ 84.52	3.082%	
Total value of money funds		$ 59,719.29	$ 84.52		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	300	$ 43.25	3.005%	$ 390.00	$ 12,975.00	1/M	Symbol: BAC\Rated: B-
DILLARD DEPT STORES INC CL A	NYSE	300	36.875	.216	24.00	11,062.50	3/L	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	47.125	1.952	184.00	9,425.00	2/L	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	35.125	.284	20.00	7,025.00	2/H	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	44.50	2.247	900.00	40,050.00	3/L	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	74.75	1.979	148.00	7,475.00	1/L	Symbol: PFE\Rated: A+

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N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
WAL-MART STORES INC NEW	NYSE	800	$ 59.125	.355%	$ 168.00	$ 47,300.00	2/M	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	200	36.25	1.434	104.00	7,250.00		Symbol: WMX\Rated: A
Total value of stocks					$ 1,936.00	$ 142,862.50		

*Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.063		$ 10,063.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,063.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
09/21/92	INTEREST ON CREDIT BALANCE	AT 3.043% 8/21 THRU 9/20	$ .18		$ .18
Total interest earned			$ .18	$ 0.00	$ .18

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
09/08/92	JOHNSON & JOHNSON	CASH DIV ON 200 SHS RECORD 08/18/92 PAY 09/08/92	$ 46.00		$ 46.00
09/15/92	BANKAMERICA CORP	CASH DIV ON 300 SHS RECORD 08/24/92 PAY 09/15/92	97.50		97.50
09/17/92	PFIZER INC	CASH DIV ON 100 SHS RECORD 08/07/92 PAY 09/17/92	37.00		37.00
Total dividends earned			$ 180.50	$ 0.00	$ 180.50

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
09/11/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 08/17/92-09/13/92 28 DAYS AVERAGE YIELD 3.14 %.	$ 142.97		$ 142.97
Total earnings from money funds			$ 142.97	$ 0.00	$ 142.97

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 59,301.54
09/09/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	140.28	140.28
09/18/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	134.50	134.50
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	142.97	142.97
	Closing money funds balance			$ 59,719.29

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement
[illegible] September 30, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 43.25	$ 7,889.60	$ 12,975.00	$ 5,085.40
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	36.875	8,874.04	11,062.50	2,188.46
JOHNSON & JOHNSON	07/26/89	200	25.582	47.125	5,184.60	9,425.00	4,240.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	35.125	287.00	7,025.00	6,738.00 #
MERCK & CO INC	12/23/88	900	13.22	44.50	11,968.62	40,050.00	28,081.38 #
PFIZER INC	06/18/91	100	58.437	74.75	5,918.71	7,475.00	1,556.29
WAL-MART STORES INC NEW	01/18/85	800	5.34	59.125	4,338.41	47,300.00	42,961.59 #
WASTE MANAGEMENT INC	11/14/90	200	33.75	36.25	6,858.59	7,250.00	391.41
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	10.063	3,520.00	10,063.00	6,543.00 #
Total value					$ 54,839.57	$ 152,625.50	$ 97,785.93

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

October 31, 1992

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
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Your Financial Consultant

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STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT
SHEARSON ASSET MGMT ADVISORY

Account value

Cash balance	$ 56
Money funds	61,992 55
Accrued money fund dividends	105 75
Stocks	138,150 00
Bonds	10,149 00
Net value this period	**$ 210,397.86**
Net value last period	**$ 212,429.49**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 56	$ 7 83	$ 0 00
Dividends	293 00	1,996 25	0 00
Money funds earnings	140 42	1,196 80	0 00
Total	$ 433 98	$ 3,200 88	$ 0 00

Gain/loss summary

	This period	This year
Realized gain or (loss)	($ 18.93)	$ 4,957.26
Unrealized gain or (loss)	100,318.02	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement
October 1 - October 31, 1992

Ref: [illegible]

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 59,719 47
Securities bought and other subtractions		0.00	
Securities sold and other additions	6,839 66		
Withdrawals		-5,000.00	
Interest credited	56		
Dividends credited	293 00		
Money funds earnings reinvested	140 42		
Total	$ 7,273 64	$ -5,000 00	
Combined closing cash and money funds balance			$ 61,993 11

Cash	.56
Money funds	61,992.55

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	61,992 55	$ 61,992.55	$ 105.75	2.955%	
Total value of money funds		**$ 61,992 55**	**$ 105 75**		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	300	$ 41 875	3 104%	$ 390.00	$ 12,562 50	1/H	Symbol: BAC\Rated: B-
DILLARD DEPT STORES INC CL A	NYSE	300	41 875	191	24 00	12,562 50	3/L	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	50 00	1 84	184 00	10 000 00	2/L	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	36 375	274	20 00	7,275 00	2/H	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	43 875	2 279	900 00	39,487 50	3/L	Symbol: MRK\Rated: A+

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
PFIZER INC	NYSE	100	$ 75.625	1.957%	$ 148.00	$ 7,562.50	1/L	Symbol: PFE\Rated: A+
WAL-MART STORES INC NEW	NYSE	800	60.875	.344	168.00	48,700.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 1,834.00	$ 138,150.00		

*Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.149		$ 10,149.00	Callable** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,149.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
10/08/92	Sold	WASTE MANAGEMENT INC AVG PRICE SHOWN-DETAILS ON REQ	-200	$ 34.785	$ 6,839.66
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 6,839.66

Withdrawals

Date	Description	Reference no	Amount
10/14/92	CHECK 0068526277 PAID BY STROUDSBURG PA		$ 5,000.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
10/21/92	INTEREST ON CREDIT BALANCE	AT 2.800% 9/21 THRU 10/20	$ .56		$ .56
Total interest earned			$ .56	$ 0.00	$ .56

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
10/01/92	MERCK & CO INC	CASH DIV ON 900 SHS RECORD 09/04/92 PAY 10/01/92	$ 225.00		$ 225.00
10/01/92	WASTE MANAGEMENT INC	CASH DIV ON 200 SHS RECORD 09/16/92 PAY 10/01/92	26.00		26.00
10/05/92	WAL-MART STORES INC NEW	CASH DIV ON 800 SHS RECORD 09/08/92 PAY 10/05/92	42.00		42.00
Total dividends earned			$ 293.00	$ 0.00	$ 293.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
10/09/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 09/14/92-10/11/92 28 DAYS AVERAGE YIELD 3.01 %.	$ 140.42		$ 140.42
Total earnings from money funds			$ 140.42	$ 0.00	$ 140.42

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 59,719.29
10/02/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	251.18	251.18
10/07/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	6,881.66	-6,881.66
10/07/92	Investment	AMERICAN EXPRESS® DAILY DIVIDEND FUND	6,881.66	6,881.66
		AMERICAN EXPRESS® DAILY	6,881.66	-6,881.66

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
10/14/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	5,000.00	$ -5,000.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	140.42	140.42
	Closing money funds balance			$ 81,992.55

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
WASTE MANAGEMENT INC AVG PRICE SHOWN-DETAILS ON REQ	11/14/90	09/29/92 Sold	200	$ 33.75	$ 34.785	$ 6,858.59	$ 6,839.66	($ 18.93)
Total realized gain or (loss)						$ 6,858.59	$ 6,839.66	($ 18.93)

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 41.875	$ 7,889.60	$ 12,562.50	$ 4,672.90
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	41.875	8,874.04	12,562.50	3,688.46
JOHNSON & JOHNSON	07/26/89	200	25.562	50.00	5,184.60	10,000.00	4,815.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	36.375	287.00	7,275.00	6,988.00 #
MERCK & CO INC	12/23/88	900	13.22	43.875	11,968.62	39,487.50	27,518.88 #
PFIZER INC	06/18/91	100	58.437	75.625	5,818.71	7,562.50	1,643.79
WAL-MART STORES INC NEW	01/18/85	800	5.34	60.875	4,338.41	48,700.00	44,361.59 #
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	10.149	3,520.00	10,149.00	6,629.00 #
Total value					$ 47,980.98	$ 148,299.00	$ 100,318.02

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

November 30, 1992

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMAIWVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT

Account value

Cash balance	$ 0.00
Money funds	46,759.70
Accrued money fund dividends	56.35
Stocks	162,500.00
Bonds	10,237.00
Net value this period	$ 219,553.05
Net value last period	$ 219,397.49

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 0.00	$ 7.83	$ 0.00
Dividends	6.00	2,002.25	0.00
Money funds earnings	160.56	1,357.36	0.00
Total	$ 166.56	$ 3,367.44	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 4,957.26
Unrealized gain or (loss)	109,356.05	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preliminary Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 61,993.11
Securities bought and other subtractions		-15,399.97	
Securities sold and other additions	0.00		
Withdrawals		0.00	
Dividends credited	8.00		
Money funds earnings reinvested	160.56		
Total	$ 168.56	$ -15,399.97	
Combined closing cash and money funds balance			$ 46,759.70

Cash	0.00
Money funds	46,759.70

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 11/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	46,759.70	$ 46,759.70	$ 56.35	2.937%	
Total value of money funds		$ 46,759.70	$ 56.35		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	300	$ 46.625	2.784%	$ 360.00	$ 13,987.50	1/H	Symbol: BAC\Rated: B-
DILLARD DEPT STORES INC CL A	NYSE	300	50.375	.158	24.00	15,112.50	3/L	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	50.375	1.828	184.00	10,075.00	2/L	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	37.375	.267	20.00	7,475.00	2/H	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	45.125	2.218	900.00	40,612.50	3/L	Symbol: MRK\Rated: A+
PFIZER INC	NYSE	100	78.125	1.894	148.00	7,812.50	1/L	Symbol: PFE\Rated: A+

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preliminary Quarterly Statement

December 31, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
PHILIP MORRIS COS INC	NYSE	200	$ 79.625	3.265%	$ 520.00	$ 15,925.00	1/L	Symbol: MO\Rated: A+
WAL-MART STORES INC NEW	NYSE	800	64.375	.326	168.00	51,500.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 2,354.00	$ 162,500.00		

*Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/26/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.237		$ 10,237.00	Next call** on 01/01/93 Call price $ 103.00 Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,237.00	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
11/03/92	Bought	PHILIP MORRIS COS INC	200	$ 76.25	$ -15,399.97
Total securities bought and other subtractions					$ -15,399.97
Total securities sold and other additions					$ 0.00

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
11/02/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 300 SHS RECORD 09/30/92 PAY 11/01/92	$ 6.00		$ 6.00
Total dividends earned			$ 6.00	$ 0.00	$ 6.00

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
11/13/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 10/12/92-11/15/92 35 DAYS AVERAGE YIELD 2.93 %.	$ 160.56		$ 160.56
Total earnings from money funds			$ 160.56	$ 0.00	$ 160.56

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 61,992.55
11/03/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	15,393.41	-15,393.41
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	160.56	160.56
	Closing money funds balance			$ 46,759.70

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	300	$ 25.875	$ 46.625	$ 7,889.60	$ 13,987.50	$ 6,097.90
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	50.375	8,874.04	15,112.50	6,238.46
JOHNSON & JOHNSON	07/26/89	200	25.562	50.375	5,184.60	10,075.00	4,890.40
MCI COMMUNICATIONS CORP	01/25/79	200	1.43	37.375	287.00	7,475.00	7,188.00 #
MERCK & CO INC	12/23/86	900	13.22	45.125	11,968.62	40,612.50	28,643.88 #
PFIZER INC	08/16/91	100	58.437	78.125	5,918.71	7,812.50	1,893.79
PHILIP MORRIS COS INC	10/27/92	200	76.25	79.625	15,399.97	15,925.00	525.03
WAL-MART STORES INC NEW	01/18/85	800	5.34	64.375	4,338.41	51,500.00	47,161.59 #
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	3.52	10.237	3,520.00	10,237.00	6,717.00 #
Total value					$ 63,380.94	$ 172,737.00	$ 109,356.06

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

December 31, 1992

N JOE RAHALL II ACF
NICK JOE RAHALL III UGTMA/WVA
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-00725-10 240
SS # 233-17-4890

As you requested, copies of this statement have also been sent to:

JAMES T SHEPHERD
SHEARSON ASSET MGT
N. JOE RAHALL

Account value

Cash balance	$ 1.38
Money funds	40,796.26
Accrued money fund dividends	0.00
Stocks	167,812.50
Bonds	10,547.00
Net value this period	**$ 219,957.14**
Net value last period	**$ 219,553.06**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 1.44	$ 9.27	$ 0.00
Dividends	190.50	2,192.75	0.00
Money funds earnings	172.16	1,529.52	0.00
Total	$ 364.10	$ 3,731.54	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 183.15	$ 5,140.41
Unrealized gain or (loss)	108,269.24	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Consolidated Client Statement

N JOE RAHALL II ACF

Account number 685-00725-10 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 46,759.70
Securities bought and other subtractions		-21,909.28	
Securities sold and other additions	15,583.12		
Withdrawals		0.00	
Interest credited	1.44		
Dividends credited	190.50		
Money funds earnings reinvested	172.16		
Total	$ 15,947.22	$ -21,909.28	
Combined closing cash and money funds balance			$ 40,797.64

Cash	1.38
Money funds	40,796.26

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	40,796.26	$ 40,796.26		2.99%	
Total value of money funds		$ 40,796.26	$ 0.00		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
ALLIED SIGNAL INC	NYSE	200	$ 60.50	1.652%	$ 200.00	$ 12,100.00	1/M	Symbol: ALD\Rated: B-
BANKAMERICA CORP	NYSE	300	46.50	2.785	390.00	13,950.00	1/H	Symbol: BAC\Rated: B-
CITICORP	NYSE	500	22.25			11,125.00	1/H	Symbol: CCI\Rated: C
DILLARD DEPT STORES INC CL A	NYSE	300	49.75	16	24.00	14,925.00	3/L	Symbol: DDS\Rated: A+
JOHNSON & JOHNSON	NYSE	200	50.50	1.821	184.00	10,100.00	2/L	Symbol: JNJ\Rated: A
MCI COMMUNICATIONS CORP	OTC	200	39.625	.252	20.00	7,925.00	2/H	Symbol: MCIC\Rated: B
MERCK & CO INC	NYSE	900	43.375	2.305	900.00	39,037.50	3/L	Symbol: MRK\Rated: A+

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

December 31, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
PFIZER INC	NYSE	100	$ 72.50	2.041%	$ 148.00	$ 7,250.00	1/L	Symbol: PFE\Rated: A+
WAL-MART STORES INC NEW	NYSE	800	64.00	.328	168.00	51,200.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 2,034.00	$ 167,612.50		

Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	$ 100,000.00	0.00%	01/01/15	10.547		$ 10,547.00	Rated A1/A+
Total value of bonds	$ 100,000.00				$ 0.00	$ 10,547.00	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
12/21/92	Sold	PHILIP MORRIS COS INC AVG PRICE SHOWN-DETAILS ON REQ	-200	$ 78.668	$ 15,583.12
12/23/92	Bought	ALLIED SIGNAL INC AVG PRICE SHOWN-DETAILS ON REQ	200	59.548	-12,059.63
12/23/92	Bought	CITICORP AVG PRICE SHOWN-DETAILS ON REQ	500	19.36	-9,849.65
Total securities bought and other subtractions					$ -21,909.28
Total securities sold and other additions					$ 15,583.12

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Monthly Client Statement

December 31, 1992

N JOE RAHALL II ACF

Account number 685-00725-10 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
12/21/92	INTEREST ON CREDIT BALANCE	AT 3.283% 11/23 THRU 12/20	$ .06		$ .06
12/31/92	INTEREST ON CREDIT BALANCE	AT 3.178% 12/21 THRU 12/30	1.38		1.38
Total interest earned			$ 1.44	$ 0.00	$ 1.44

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/07/92	MCI COMMUNICATIONS CORP	CASH DIV ON 200.0000 SHS RECORD 11/13/92 PAY 12/07/92	$ 10.00		$ 10.00
12/08/92	JOHNSON & JOHNSON	CASH DIV ON 200.0000 SHS RECORD 11/17/92 PAY 12/08/92	46.00		46.00
12/14/92	BANKAMERICA CORP	CASH DIV ON 300.0000 SHS RECORD 11/23/92 PAY 12/14/92	97.50		97.50
12/17/92	PFIZER INC	CASH DIV ON 100.0000 SHS RECORD 11/20/92 PAY 12/17/92	37.00		37.00
Total dividends earned			$ 190.50	$ 0.00	$ 190.50

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
12/11/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 11/18/92-12/13/92 28 DAYS AVERAGE YIELD 2.94 %.	$ 105.65		$ 105.65
12/31/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 12/14/92-12/31/92 18 DAYS AVERAGE YIELD 2.99 %.	66.51		66.51
Total earnings from money funds			$ 172.16	$ 0.00	$ 172.16

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 46,759.70
12/15/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	153.50	153.50

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

N JOE RAHALL II ACF

Account number 685-00725-10 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
12/22/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	15,620.18	$ 15,620.18
12/23/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	21,909.28	-21,909.28
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	172.16	172.16
	Closing money funds balance			$ 40,796.28

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
PHILIP MORRIS COS INC AVG PRICE SHOWN-DETAILS ON REQ	10/27/92	12/14/92 Sold	200	$ 76.25	$ 78.668	$ 15,399.97	$ 15,583.12	$ 183.15
Total realized gain or (loss)						$ 15,399.97	$ 15,583.12	$ 183.15

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
ALLIED SIGNAL INC	12/16/92	200	$ 59.548	$ 60.50	$ 12,059.63	$ 12,100.00	$ 40.37
BANKAMERICA CORP	01/21/91	300	25.875	46.50	7,889.60	13,950.00	6,060.40
CITICORP	12/16/92	500	19.36	22.25	9,849.65	11,125.00	1,275.35
DILLARD DEPT STORES INC CL A	01/30/91	300	29.339	49.75	8,874.04	14,925.00	6,050.96
JOHNSON & JOHNSON	07/26/89	200	25.562	50.50	5,184.60	10,100.00	4,915.40
MCI COMMUNICATIONS CORP	01/25/78	200	1 43	39.625	287.00	7,925.00	7,638.00 #
MERCK & CO INC	12/23/88	900	13 22	43.375	11,968 62	39,037.50	27,068.88 #
PFIZER INC	06/18/91	100	58.437	72.50	5,918.71	7,250.00	1,331.29
WAL-MART STORES INC NEW	01/18/85	800	5.34	64.00	4,338.41	51,200.00	46,861.59 #

N JOE RAHALL II ACF

Account number 685-00725-10 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
WEST VIRGINIA HSG DEV FD SFMR 0-CPN-TERM APPREC YTM 11.0%-RG SER B-TICOR-DTD 9/28/83-CBLE	09/01/83	100,000	$ 3.52	$ 10.547	$ 3,520.00	$ 10,547.00	$ 7,027.00 #
Total value					$ 69,890.26	$ 178,159.50	$ 108,269.24

#Based on information supplied by your Financial Consultant.

Important Administrative Notice. *Effective February 15, 1993, we will assess a $50 charge for any account closed when assets are transferred to another financial institution. This fee will cover related costs incurred by this transfer.*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Shearson Client Statement

[illegible] - March 31, 1992

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-08740-14 240
SS # 233-25-9977

As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks	$ 22,575 00
Bonds	5,096 90
Income account balance	20 39
Net value this period	$ 27,692 29
Net value last period	$ 29,723 43

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .16	$ .16	$ 0 00
Total	$ .16	$ .16	$ 0 00

Bulletin board

Are Your Mutual Funds Meeting Your Needs?
Our unique Mutual Funds Evaluation Service can help you evaluate your mutual funds' performance using objective information from CDA Technologies, Inc. Call your Financial Consultant for a complimentary personalized analysis.

#1

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 20 23
Interest credited	16		
Total	$ 16	$ 0 00	
Closing cash balance			$ 20 39

Income account balance 20 39

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/31/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMGEN INC	OTC	150	62.50			9,375.00	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	400	33.00	.303	40.00	13,200.00	Symbol: MCIC\Rated: B
Total value of stocks					$ 40.00	$ 22,575.00	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	50.969		$ 5,096.90	Callable** on 06/01/99 Call price $ 83 06 Rated AAA/AAA
Total value of bonds	$ 10,000.00				$ 0.00	$ 5,096.90	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
01/21/92	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 3.360% 12/31 THRU 1/20	$ .04			$ .04
02/21/92	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 3.301% 1/21 THRU 2/20	$ .06			$ .06
03/23/92	INTEREST ON CREDIT BALANCE INT ON DIVIDEND CREDIT BALANCE AT 3.504% 2/21 THRU 3/22	$ .06			$ .06
Total interest earned		$ .16	$ 0.00		$ .16

Notice of Fee Change.
Effective May 1, 1992, we will increase administrative charges on transaction confirmations from $2.85 to $3.85. Offerings made by prospectus and most short-term fixed-income instruments such as money markets, certificates of deposit and Treasury bills will not be subject to this charge. The fee is being increased so that we may continue to deliver high-quality products and services to you while ensuring that we remain competitively priced.

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SHEARSON LEHMAN BROTHERS

Preferred Client Statement

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08740-14 240
SS # 233-25-9977

As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks		$ 21,981 25
Bonds		5,375 20
Income account balance		40 56
Net value this period		**$ 27,397.01**
Net value last period	$ 27,692 29	

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ .17	$ .33	$ 0.00
Dividends	20.00	20.00	0.00
Total	$ 20.17	$ 20 33	$ 0 00

Bulletin board

Avoid "Double Whammy."
The "double whammy" of lower yields and higher taxes means that you may need to look beyond traditional savings vehicles to earn income, manage tax liabilities and fight inflation. Ask your Financial Consultant for our Special Report, Avoiding The "Double Whammy" of Lower Interest Rates and Higher Taxes (GP2150).

Uncommon Values.
Our 44th edition of Uncommon Values In Common Stocks - a list of 10 stocks we believe will outperform the market over the next 12 months - was announced July 1. Ask your Financial Consultant for your copy of 10 Uncommon Values In Common Stocks (RS2012).

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Monthly Statement

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 20.39
Interest credited	.17		
Dividends credited	20.00		
Total	$ 20.17	$ 0.00	
Closing cash balance			$ 40.56

Income account balance 40.56

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/30/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMGEN INC	OTC	150	60.875			9,131.25	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	400	32.125	.311	40.00	12,850.00	Symbol: MCIC\Rated: B
Total value of stocks					$ 40.00	$ 21,981.25	

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30% AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	53.752		$ 5,375.20	Callable** on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds	$ 10,000.00				$ 0.00	$ 5,375.20	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
04/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 3.416% 3/23 THRU 4/20	$ .06		$ .06
05/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 3.166% 4/21 THRU 5/20	$ .05		$ .05
06/22/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 3.200% 5/21 THRU 6/21	$ .06		$ .06
Total interest earned			$ .17	$ 0.00	$ .17

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/19/92	MCI COMMUNICATIONS CORP	CASH DIV ON 400 SHS RECORD 05/29/92 PAY 06/19/92	$ 20.00		$ 20.00
Total dividends earned			$ 20.00	$ 0.00	$ 20.00

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

Statement of Account

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMA/WV
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08740-14 240
SS # 233-25-9977

As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks	$ 23,482.50
Bonds	5,581.80
Income account balance	40.84
Net value this period	$ 29,085.14
Net value last period	$ 27,397.01

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ .28	$ .61	$ 0.00
Dividends	0.00	20.00	0.00
Total	$ .28	$ 20.61	$ 0.00

Bulletin board

Research Rankings Are Now On Your Statement.
As an added service, the research rankings of all common stocks followed by our analysts are featured in the Portfolio details section of your statement. Definitions of rankings appear on the back of the statement. For more information on our highly rated equity research, contact your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 40.56
Interest credited	.28		
Total	$ .28	$ 0.00	
Closing cash balance			$ 40.84

Cash	0.00
Income account balance	40.84

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/30/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMGEN INC	OTC	150	$ 62.75			$ 9,412.50	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	400	35.125	.284	40.00	14,050.00	2/H	Symbol: MCIC\Rated: B
Total value of stocks					$ 40.00	$ 23,462.50		

*Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	55.818		$ 5,581.80	Callable** on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds	$ 10,000.00				$ 0.00	$ 5,581.80	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
07/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.920% 6/22 THRU 7/20	$ .10		$ .10
08/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.659% 7/21 THRU 8/20	.09		.09
09/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.543% 8/21 THRU 9/20	.09		.09
Total interest earned			$ .28	$ 0.00	$ .28

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

October 1 - October 31, 1992

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
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701 MAIN STREET
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717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08740-14 240
SS # 233-25-9977

As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks		$ 17,587 50
Bonds		$ 5,461 60
Income account balance		40 92
Net value this period		$ 23,090 02
Net value last period	$ 20,886.14	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .08	$ .69	$ 0 00
Dividends	0.00	20 00	0 00
Total	$ .08	$ 20 69	$ 0 00

Bulletin board

#1 In Research Poll -- Again. *In October, Institutional Investor magazine announced that, for the third consecutive year, Shearson Lehman Brothers has more All-Star equity research analysts than any other firm. And, for the first time we are #1 in fixed-income research. Ask your Financial Consultant how you can take advantage of our All-Star research.*

Planning For Retirement?. *If you're a business owner looking for a year-end tax deduction or a way to capture higher rates of return for existing retirement plans, talk to your Financial Consultant now. Also, if you have more than one IRA, consider consolidating them with us*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 40.84
Securities bought and other subtractions		0.00	
Securities sold and other additions	6,709.81		
Withdrawals		-6,709.81	
Interest credited	.08		
Total	$ 6,709.89	$ -6,709.81	
Closing cash balance			$ 40.92

Cash	0.00
Income account balance	40.92

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/30/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMGEN INC	OTC	100	$ 66.75			$ 6,675.00	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	300	36.375	.274	30.00	10,912.50	2/H	Symbol: MCIC\Rated: B
Total value of stocks					$ 30.00	$ 17,587.50		

*Please refer to the back of the statement for definitions of research rankings.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement
October 1 - October 31, 1992

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	54.616		$ 5,461.60	Callable** on 06/01/99 Call price $ 83.06 Rated AAA/AAA
Total value of bonds	$ 10,000.00				$ 0.00	$ 5,461.60	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
10/30/92	Sold	AMGEN INC ODD LOT - EXECUTED AS AGY	-50	$ 65.50	$ 3,201.16
10/30/92	Sold	MCI COMMUNICATIONS CORP	-100	35.125	3,508.65
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 6,709.81

Withdrawals

Date	Description	Reference no	Amount
10/30/92	CHECK 0068526484 PAID BY STROUDSBURG PA		$ 6,709.81

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
10/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.300% 9/21 THRU 10/20	$ .08		$ .08
Total interest earned			$ .08	$ 0.00	$ .08

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

#28

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$20,116.80		$3,268.05	$23,384.85

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	3,246.19	3,268.05
TOTAL MONEY MARKET		3,268.05

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	17.00CR	17.00CR
GSP DIVIDENDS CREDITED	4.86CR	4.86CR
AVERAGE YIELD ON MONEY MARKET	1/01/92 TO	1/15/92 3.81%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 02	1	JOURNAL	20	GLAXO HOLDINGS PLC ADR F SPONSORED FR 65398600 A/O 12/31			
1 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 100			17.00
1 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	17.00	
1 16	1	DIVIDEND	4.86	REINVESTED DIVIDEND GSP AS OF 1/15/92			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		BROWNING FERRIS INDS INC	22.0000	2,200.00
1	20		GLAXO HOLDINGS PLC ADR F SPONSORED	30.7500	615.00
			FIXED INCOME SECURITIES		

---CONTINUED ON NEXT PAGE---

4-92-000 WWSLR 30

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

BUTCHER & SINGER IS A DIVISION OF WHEAT, FIRST SECURITIES, INC., MEMBER NEW YORK STOCK EXCHANGE AND SIPC

FOR IMPORTANT ADDITIONAL INFORMATION PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	10.0240	1,002.40
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	19.2770	3,855.40
1	50000		VESTAVIA HILLS ALA O.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	24.8880	12,444.00
			VALUE OF PRICED SECURITIES		20,116.80

TO INSURE ACCURACY FOR OUR RECORDS AND THOSE REQUIRED BY THE INTERNAL REVENUE SERVICE, PLEASE VERIFY THAT THE TAX ID NUMBER LISTED ON THIS STATEMENT IS CORRECT. SHOULD A DISCREPANCY EXIST, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

4-09-003 WWBLR 3F

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FOR IMPORTANT ADDITIONAL INFORMATION PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$22,603.85		$831.56	$23,435.41

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	3,268.05	831.56
TOTAL MONEY MARKET		831.56

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	17.00CR
GSP DIVIDENDS CREDITED	11.03CR	15.89CR
AVERAGE YIELD ON MONEY MARKET	1/16/92 TO	2/18/92 3.62%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 07	1	SALE	20-	GLAXO HOLDINGS PLC ADR F SPONSORED	30.0000		559.98
2 10	1	PURCHASE	50	A L LABORATORIES CLASS A	23.2500	1,202.50	
2 18	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		642.52
2 19	1	PURCHASE	50	IHOP CORP NEW	16.7500	877.50	
2 19	1	PURCHASE	50	KROGER COMPANY COMMON	17.7500	927.50	
2 19	1	DIVIDEND	11.03	REINVESTED DIVIDEND GSP AS OF 2/18/92			
2 26	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,805.00

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	50		A L LABORATORIES CLASS A	21.8750	1,093.75
1	100		BROWNING FERRIS INDS INC	23.1250	2,312.50

---CONTINUED ON NEXT PAGE---

S-01-002 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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IN INDIVIDUAL INFORMATION PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8408 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50		IHOP CORP NEW	16.750D	837.50
1	50		KROGER COMPANY COMMON	18.0000	900.00
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B DY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.9810	998.10
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	19.6950	3,939.00
1	50000		VESTAVIA HILLS ALA G.O. WTS DY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.046D	12,523.00
			VALUE OF PRICED SECURITIES		22,603.85

IF YOU ARE ROLLING OVER AN IRA OR HAVE CDS
MATURING SOON, ASK YOUR FINANCIAL CONSULTANT
FOR SUGGESTIONS ABOUT CONSERVATIVE ALTERNATIVE
INVESTMENTS THAT MAY PAY CONSIDERABLY MORE THAN
WHAT YOU ARE PRESENTLY RECEIVING.

---END OF STATEMENT---

S-02-002 WWBLR 4

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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FOR IMPORTANT ADDITIONAL INFORMATION PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8A08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$22,464.25		$834.82	$23,299.07

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	831.56	834.82
TOTAL MONEY MARKET		834.82

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	17.00CR
GSP DIVIDENDS CREDITED	3.26CR	19.15CR
AVERAGE YIELD ON MONEY MARKET	2/19/92 TO 3/16/92	3.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 17	1	DIVIDEND	3.26	REINVESTED DIVIDEND GSP AS OF 3/16/92			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	50		A L LABORATORIES CLASS A	23.0000	1,150.00
1	100		BROWNING FERRIS INDS INC	21.7500	2,175.00
1	50		IHOP CORP NEW	15.7500	787.50
1	50		KROGER COMPANY COMMON	17.1250	856.25
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B DY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.9960	999.60

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3-91-002 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
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BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	19.8620	3,972.40
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.0470	12,523.50
			VALUE OF PRICED SECURITIES		22,464.25

INTRODUCING THE CAMBRIDGE FAMILY OF FUNDS, A FINANCIAL RESOURCE THAT YOU CAN USE THROUGHOUT YOUR LIFE TO PURSUE YOUR MAJOR FINANCIAL GOALS. SEE PAGE 3 OF THE ENCLOSED INVESTOR'S SPECTRUM, THEN CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER DETAILS.

---END OF STATEMENT---

3-02-002 WW

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

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BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$23,288.50		$52.64	$23,341.14

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	834.82	52.64
TOTAL MONEY MARKET		52.64

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	19.25CR	36.25CR
GSP DIVIDENDS CREDITED	2.07CR	21.22CR
AVERAGE YIELD ON MONEY MARKET	3/17/92 TO 4/15/92	3.48%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 06	1	PURCHASE	50	RAUCH INDS INC	16.0000	803.50	
4 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 100			17.00
4 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		786.50
4 14	1	DIVIDEND		A L LABORATORIES CLASS A QUANTITY 50			2.25
4 16	1	DIVIDEND	2.07	REINVESTED DIVIDEND GSP AS OF 4/15/92			
4 21	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2.25	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	50		A L LABORATORIES CLASS A	23.0000	1,150.00

---CONTINUED ON NEXT PAGE---

2-01-002 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	100		BROWNING FERRIS INDS INC	21.7500	2,175.00
1	50		IHOP CORP NEW	16.0000	800.00
1	50		KROGER COMPANY COMMON	17.2500	862.50
1	50		RAUCH INDS INC	16.0000	800.00
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.9540	995.40
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	19.9430	3,988.60
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.0340	12,517.00
			VALUE OF PRICED SECURITIES		23,288.50

HAVE YOU TAKEN ADVANTAGE OF THE RECENT ENHANCEMENTS TO THE CASH RESOURCES ACCOUNT? FOR MORE INFORMATION, PLEASE SEE THIS MONTH'S INVESTOR'S SPECTRUM. IF YOU DO NOT HAVE A CRA ACCOUNT, CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

2-02-002 WWBLR 4/

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BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

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25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$23,355.00	$19.25DB		$23,335.75

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	19.25DB
NET CLOSING BALANCE		19.25DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	52.67	.00
TOTAL MONEY MARKET		.00

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	1.50CR	37.75CR
GSP DIVIDENDS CREDITED	.00	21.25CR

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 08	1	STOCK DIV	25	RAUCH INDS INC			
6 23	1	SALE	50-	INOP CORP NEW	13.8750		653.75
6 23	1	PURCHASE	50	KROGER COMPANY COMMON	15.250D	802.50	
6 24	1	DEPOSIT		FUNDS RECD			75.33
6 26	1	DIVIDEND		RAUCH INDS INC QUANTITY 75			1.50
6 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		52.67

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE

EQUITIES AND OPTIONS

---CONTINUED ON NEXT PAGE---

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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25801-4611

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50		A L LABORATORIES CLASS A	18.6250	931.25
1	100		BROWNING FERRIS INDS INC	22.0000	2,200.00
1	100		KROGER COMPANY COMMON	14.8750	1,487.50
1	75		RAUCH INDS INC	10.2500	768.75
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.9800	998.00
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	21.0900	4,218.00
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.5030	12,751.50
			VALUE OF PRICED SECURITIES		23,355.00

OUR CONSOLIDATED STATEMENT OF FINANCIAL CONDITION
FOR THE FISCAL YEAR ENDED MARCH 31, 1992 IS ENCLOSED
IN LIEU OF THE INVESTOR'S SPECTRUM. THE NEXT ISSUE
OF THE INVESTOR'S SPECTRUM WILL BE IN THE JULY
STATEMENTS, WHICH WILL BE MAILED EARLY IN AUGUST.

---END OF STATEMENT---

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STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$23,429.50		$52.67	$23,482.17

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	52.64	52.67
TOTAL MONEY MARKET		52.67

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	36.25CR
GSP DIVIDENDS CREDITED	.03CR	21.25CR
AVERAGE YIELD ON MONEY MARKET	4/16/92 TO 5/15/92	3.27%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 18	1	DIVIDEND	.03	REINVESTED DIVIDEND GSP AS OF 5/15/92			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	50		A L LABORATORIES CLASS A	23.5000	1,175.00
1	100		BROWNING FERRIS INDS INC	20.7500	2,075.00
1	50		IHOP CORP NEW	15.0000	750.00
1	50		KROGER COMPANY COMMON	17.7500	887.50
1	50		RAUCH INDS INC	15.7500	787.50
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.6990	969.90

---CONTINUED ON NEXT PAGE---

4-01-402 WWBLR 47

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	20.1830	4,036.60
1	50000		VESTAVIA HILLS ALA G.O. WTS DY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.4960	12,748.00
			VALUE OF PRICED SECURITIES		23,429.50

SUMMERTIME IS ALWAYS A GOOD TIME TO TAKE A LOOK AT YOUR INVESTMENT PORTFOLIO TO BE SURE IT IS ON TARGET WITH YOUR CURRENT INVESTMENT OBJECTIVES. IF YOU WOULD LIKE TO REVIEW YOUR INVESTMENTS, PLEASE CALL YOUR FINANCIAL CONSULTANT FOR AN APPOINTMENT.

---END OF STATEMENT---

4-92-002 WWBLR 47

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--- [illegible] INFORMATION, PLEASE SEE REVERSE SIDE

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STATEMENT

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25801-4611

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$25,322.90		$97.00	$25,419.90

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	19.25DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	.00	97.00
TOTAL MONEY MARKET		97.00

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	19.25CR	57.00CR
GSP DIVIDENDS CREDITED	.00	21.25CR

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 02	1	DIVIDEND		A L LABORATORIES CLASS A QUANTITY 50			2.25
7 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 100			17.00
7 21	1	PURCHASE	393.701	COLONIAL TR VI U S FD - FOR GROWTH CL B AS OF 7/20/92	10.1600	4,000.00	
7 21	1	SALE	589.441-	MFS WORLDWIDE TOTAL - RETURN TRUST SBI AS OF 7/20/92	10.2600		6,037.6
7 22	1	PURCHASE	50	A L LABORATORIES CLASS A	18.7500	979.15	
7 22	1	PURCHASE	25	RAUCH INDS INC	11.5000	327.50	
7 23	1	SALE	50-	KROGER COMPANY COMMON	13.6250		681.2
7 23	1	PURCHASE	100	ZWEIG FUND INC	12.7500	1,315.23	

---CONTINUED ON NEXT PAGE---

7-01-092 WFS

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

BUTCHER & SINGER IS A DIVISION OF WHEAT, FIRST SECURITIES, INC., MEMBER NEW YORK STOCK EXCHANGE AND SIPC

Wheat Butcher & Singer

[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6940-1050	23:-25-9977	GROWTH & INCOME (QUALITY)	EDWARD O RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 27	1	TO PLAN ACCT	393.701-	COLONIAL TR VI U S FD - FOR GROWTH CL B			
7 27	1	RECEIVED	589.441	MFS WORLDWIDE TOTAL - RETURN TRUST SBI			
7 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	731.01	
7 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		634.01

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		A L LABORATORIES CLASS A	19.6250	1,962.50
1	100		BROWNING FERRIS INDS INC	22.7500	2,275.00
1	50		KROGER COMPANY COMMON	14.7500	737.50
1	100		RAUCH INDS INC	10.2500	1,025.00
1	100		ZWEIG FUND INC	13.0000	1,300.00
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.7830	978.30
1	20000		SOUTHEAST TEX HSO FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	21.4730	4,294.60
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.5000	12,750.00
			VALUE OF PRICED SECURITIES		25,322.90

IF YOU HAD MUNICIPAL BONDS CALLED RECENTLY, OR EXPECT TO HAVE MUNICIPAL BONDS CALLED IN THE FUTURE, WE SUGGEST READING THE ARTICLE ON PAGE 3 OF INVESTOR'S SPECTRUM INCLUDED WITH THIS STATEMENT. FOR MORE INFORMATION, CALL YOUR FINANCIAL CONSULTANT.

7-92-002 WWBLI

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
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STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$25,312.35	$192.39CR	$97.29	$25,602.03

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	192.39CR
NET CLOSING BALANCE		192.39CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	97.00	97.29
TOTAL MONEY MARKET		97.29

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	57.00CR
GSP DIVIDENDS CREDITED	.29CR	21.54CR
AVERAGE YIELD ON MONEY MARKET	7/16/92 TO	8/17/92 2.66%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 18	1	DIVIDEND	.29	REINVESTED DIVIDEND GSP AS OF 8/17/92			
8 26	1	SALE	100-	A L LABORATORIES CLASS A	21.2500		2,072.41
8 31	1	SALE	50-	KROGER COMPANY COMMON	11.8750		593.73
8 31	1	PURCHASE	50	MARION MERRELL DOW INC	27.6250	1,421.25	
8 31	1	PURCHASE	50	TYSON FOODS INC CL A	20.2500	1,052.50	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		BROWNING FERRIS INDS INC	23.2500	2,325.00

---CONTINUED ON NEXT PAGE---

3-01-002 WWSLR 1

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50		MARION MERRELL DOW INC	27.7500	1,387.50
1	100		RAUCH INDS INC	10.2500	1,025.00
1	50		TYSON FOODS INC CL A	19.8750	993.75
1	100		ZWEIG FUND INC	13.0000	1,300.00
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B DY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.5510	955.10
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	21.6250	4,325.00
1	50000		VESTAVIA HILLS ALA G.O. WTS DY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	26.0020	13,001.00
			VALUE OF PRICED SECURITIES		25,312.35

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

3-92-002 WWBLR 11

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901 EAST BYRD STREET, RICHMOND, VA 23219

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ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$25,277.85		$292.03	$25,569.88

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	192.39CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	97.29	292.03
TOTAL MONEY MARKET		292.03

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	2.00CR	59.00CR
GSP DIVIDENDS CREDITED	.35CR	21.89CR
AVERAGE YIELD ON MONEY MARKET 8/18/92 TO 9/15/92		2.57%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 08	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	192.39	
9 16	1	DIVIDEND	.35	REINVESTED DIVIDEND GSP AS OF 9/15/92			
9 25	1	DIVIDEND		RAUCH INDS INC QUANTITY 100			2.00
9 29	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2.00	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		BROWNING FERRIS INDS INC	23.7500	2,375.00

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2-01-002 WWBLR 15

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
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STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50		MARION MERRELL DOW INC	26.1250	1,306.25
1	100		RAUCH INDS INC	10.7500	1,075.00
1	50		TYSON FOODS INC CL A	22.3750	1,118.75
1	100		ZWEIG FUND INC	12.7500	1,275.00
			FIXED INCOME SECURITIES		
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.5625	956.25
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	20.9180	4,183.60
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.9760	12,988.00
			VALUE OF PRICED SECURITIES		25,277.85

IF THE YIELD ON YOUR CDS IS DISAPPOINTING,
WHY NOT CALL YOUR FINANCIAL CONSULTANT FOR A COPY
OF OUR NEW BOOKLET "SIX WAYS TO EARN SIX PERCENT OR
MORE?" IT CARRIES A WEALTH OF INFORMATION FOR
CONSERVATIVE INVESTORS. SEE LEAFLET ENCLOSED.

---END OF STATEMENT---

9-92-602 WWSLR 1

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ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$26,597.45			$26,597.45

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	292.03	.00
TOTAL MONEY MARKET		.00

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	57.50CR	116.50CR
GSP DIVIDENDS CREDITED	.56CR	22.45CR
AVERAGE YIELD ON MONEY MARKET	9/16/92 TO 10/15/92	2.42%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 02	1	RECEIVED	10000	ALABAMA HSG FIN AUTH SINGLE FAMILY MTG REV 1983 A CPN 0.000% DUE 10/01/14 DTD 8/31/83 FROM 6539-6600 NICK J RAHALL & MARY AL			
10 06	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 100			17.00
10 13	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	17.00	
10 16	1	DIVIDEND	.56	REINVESTED DIVIDEND GSP AS OF 10/15/92			
10 22	1	SALE	100-	RAUCH INDS INC	10.2500		985.00
10 23	1	PURCHASE	200	BLUE CHIP VALUE FD INC	7.6250	1,581.20	
10 26	1	DIVIDEND		ZWEIG FUND INC QUANTITY 100			28.00
10 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	28.00	
10 27	1	DEPOSIT		FUNDS RECD			246.11

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7-01-000 WWBLR 30

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 29	1	DIVIDEND		MARION MERRELL DOW INC QUANTITY 50			12.50
10 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		337.59

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BLUE CHIP VALUE FD INC	7.7500	1,550.00
1	100		BROWNING FERRIS INDS INC	23.1250	2,312.50
1	50		MARION MERRELL DOW INC	25.5000	1,275.00
1	50		TYSON FOODS INC CL A	20.8750	1,043.75
1	100		ZWEIG FUND INC	12.5000	1,250.00
			FIXED INCOME SECURITIES		
1	10000		ALABAMA HSG FIN AUTH SINGLE FAMILY MTG REV 1983 A CPN 0.000% DUE 10/01/14 DTD 8/31/83	10.2000	1,020.00
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.6460	964.60
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	20.9830	4,196.60
1	50000		VESTAVIA HILLS ALA G.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	25.9700	12,985.00
			VALUE OF PRICED SECURITIES		26,597.45

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7-89-000 WWBLR 30

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STATEMENT PERIOD	PAGE
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WITH JUST TWO MONTHS REMAINING BEFORE THE END OF THE YEAR, IT'S IMPORTANT TO THINK ABOUT PORTFOLIO AND PERSONAL EXPENSE ADJUSTMENTS TO HELP REDUCE INCOME TAXES. SEE CHUCK AULINO'S ARTICLE ON YEAR-END TAX STRATEGIES IN THE INVESTOR'S SPECTRUM ENCLOSED.

---END OF STATEMENT---

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STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$26,931.55	$253.70CR	$3,621.94	$30,807.19

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	253.70CR
NET CLOSING BALANCE		253.70CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	.00	3,621.94
TOTAL MONEY MARKET		3,621.94

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	116.50CR
GSP DIVIDENDS CREDITED	4.63CR	27.08CR
AVERAGE YIELD ON MONEY MARKET 10/16/92 TO 11/16/92		2.39%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 03	1	PURCHASE	100	MORGAN GRENFELL SMALL CAP FUND INC	11.1250	1,152.50	
11 05	1	DEPOSIT		SHEARSON LEHMAN BROS			6,709.81
11 06	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,709.81	
11 09	1	SALE	50-	TYSON FOODS INC CL A	22.0000		1,060.00
11 10	1	PURCHASE	416.667	COLONIAL TR II U S - GOVT FD CL A AS OF 11/09/92	7.2000	3,000.00	
11 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,152.50
11 17	1	TO PLAN ACCT	416.667-	COLONIAL TR II U S - GOVT FD CL A			
11 17	1	DIVIDEND	4.63	REINVESTED DIVIDEND GSP AS OF 11/16/92			
11 17	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,940.00

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3-01-003 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 24	1	PURCHASE	138.696	COLONIAL TR II U S - GOVT FD CL A AS OF 11/23/92	7.2100	1,000.00	
11 24	1	SALE	50-	MARION MERRELL DOW INC	25.8750		1,253.70

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BLUE CHIP VALUE FD INC	7.7500	1,550.00
1	100		BROWNING FERRIS INDS INC	24.7500	2,475.00
1	138.696		COLONIAL TR II U S - GOVT FD CL A	6.8600	951.45
1	100		MORGAN GRENFELL SMALL CAP FUND INC	12.8750	1,287.50
1	100		ZWEIG FUND INC	12.8750	1,287.50
			FIXED INCOME SECURITIES		
1	10000		ALABAMA HSG FIN AUTH SINGLE FAMILY MTG REV 1983 A CPN 0.000% DUE 10/01/14 DTD 8/31/83	10.2890	1,028.90
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B DY=10.746% CPN 0.000% DUE 2/01/15 DTD 12/28/83	9.7310	973.10
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 DTD 9/17/84	21.2980	4,259.60
1	50000		VESTAVIA HILLS ALA G.O. WTS DY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 DTD 3/15/84 CALL 3/01/94 @ 29.080	26.2370	13,118.50
			VALUE OF PRICED SECURITIES		26,931.55

---CONTINUED ON NEXT PAGE---

3-02-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	3

NOW THAT THE NATIONAL ELECTIONS HAVE BEEN DECIDED,
ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING
MARKET OPPORTUNITIEST TO BE SURE, WHY NOT REVIEW
YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT?
CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

3-93-003 WWBLR :

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD O RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
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25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801

304-252-6221

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$23,701.60	$156.68DB	$6,405.68	$29,950.60

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	253.70CR	156.68DB
NET CLOSING BALANCE		156.68DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	3,621.94	6,405.68
TOTAL MONEY MARKET		6,405.68

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	116.50CR
GSP DIVIDENDS CREDITED	14.46CR	41.54CR
AVERAGE YIELD ON MONEY MARKET 11/17/92 TO 12/31/92		2.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 01	1	TO PLAN ACCT	138.696-	COLONIAL TR II U S GOVT FD CL A			
12 01	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,000.
12 07	1	SALE	100-	BROWNING FERRIS INDS INC	25.7500		2,515.
12 08	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	1,253.70	
12 15	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,515.58	
12 28	1	PURCHASE	100	ZWEIG FUND INC	13.0000	1,341.63	
12 30	1	SALE	100-	MORGAN GRENFELL SMALL CAP FUND INC	12.2500		1,184.
12 31	1	DIVIDEND	14.46	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BLUE CHIP VALUE FD INC	7.7500	1,550.

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5-01-002 WW

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-1050	233-25-9977	GROWTH & INCOME (QUALITY)	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	200		ZWEIG FUND INC	13.0000	2,600.0
			FIXED INCOME SECURITIES		
1	10000		ALABAMA HSG FIN AUTH SINGLE FAMILY MTG REV 1983 A CPN 0.000% DUE 10/01/14 OTD 8/31/83	10.5980	1,059.8
1	10000		ILLINOIS HSG DEV AUTH RESIDENTIAL MTG REV 1983 SER B OY=10.746% CPN 0.000% DUE 2/01/15 OTD 12/28/83	10.4570	1,045.
1	20000		SOUTHEAST TEX HSG FIN CORP SINGLE FAMILY MTG REV EXT CALL CPN 0.000% DUE 9/01/07 OTD 9/17/84	21.4730	4,294.
1	50000		VESTAVIA HILLS ALA O.O. WTS OY=10.50 NO PERIODIC INTEREST CPN 0.000% DUE 3/01/07 OTD 3/15/84 CALL 3/01/94 @ 29.080	26.3030	13,151.
			VALUE OF PRICED SECURITIES		23,701.

WE APPRECIATE YOUR PATRONAGE THE PAST YEAR AND LOOK FORWARD TO SERVING YOU IN 1993. TO ENSURE THE ACCURACY OF OUR RECORDS AND THOSE REQUIRED BY THE IRS, PLEASE VERIFY THE TAX ID NUMBER ON THIS STATEMENT. IF INCORRECT, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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DIVISION OF WHEAT, FIRST SECURITIES, INC., MEMBER NEW YORK STOCK EXCHANGE AND SIPC

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901 EAST BYRD STREET, RICHMOND, VA 23219

#2

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$16,597.25		$51,247.99	$67,845.24

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	21,085.68CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	29,984.90	51,247.99
TOTAL MONEY MARKET		51,247.99

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	111.00CR	111.00CR
GSP DIVIDENDS CREDITED	66.41CR	66.41CR
AVERAGE YIELD ON MONEY MARKET	1/01/92 TO	1/15/92 3.81%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 02	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
1 02	1	JOURNAL	20	GLAXO HOLDINGS PLC ADR F SPONSORED FR 65398600 A/O 12/31			
1 02	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,901.71	
1 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 300			51.00
1 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	60.00	
1 09	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	11,234.97	
1 16	1	DIVIDEND	66.41	REINVESTED DIVIDEND GSP AS OF 1/15/92			

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3-02-000 WWBLJ

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	200		BROWNING FERRIS INDS INC	22.0000	4,400.0C
1	20		GLAXO HOLDINGS PLC ADR F SPONSORED	30.7500	615.0C
1	500		PICCADILLY CAFETERIAS	9.2500	4,625.0C
			FIXED INCOME SECURITIES		
1	7000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	31.0250	2,171.7!
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.5710	4,785.5(
			VALUE OF PRICED SECURITIES		16,597.2!
MF	2967.810		MFS GOVT INCOME PLUS TR (AS OF 1/24)	6.9400	20,596.6(

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

TO INSURE ACCURACY FOR OUR RECORDS AND THOSE REQUIRED BY THE INTERNAL REVENUE SERVICE, PLEASE VERIFY THAT THE TAX ID NUMBER LISTED ON THIS STATEMENT IS CORRECT. SHOULD A DISCREPANCY EXIST, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K06 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
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25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$36,920.85	$20,102.69DB	$51,989.21	$68,807.37

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	20,102.69DB
NET CLOSING BALANCE		20,102.69DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	51,247.99	51,989.21
TOTAL MONEY MARKET		51,989.21

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	111.00CR
GSP DIVIDENDS CREDITED	173.75CR	240.16CR
AVERAGE YIELD ON MONEY MARKET	1/16/92 TO 2/18/92	3.62%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 07	1	SALE	20-	CLAXO HOLDINGS PLC ADR F SPONSORED	30.3750		567.47
2 18	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	567.47	
2 19	1	DIVIDEND	173.75	REINVESTED DIVIDEND GSP AS OF 2/18/92			
2 24	1	PURCHASE	200	IHOP CORP NEW	16.7500	3,452.41	
2 25	1	PURCHASE	100	ALBERTSONS INC	42.8750	4,377.15	
2 25	1	PURCHASE	200	MYLAN LABORATORIES INC	31.6250	6,472.29	
2 26	1	PURCHASE	100	MC DONALDS CORP	41.0000	4,196.82	
2 26	1	PURCHASE	100	U S BIOSCIENCE	15.5000	1,604.02	
2 28	1	EXCHANGE	3000	MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV			

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1-01-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8408 5540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 28	1	EXCHANGE	3000-	CPN 0.000% DUE 3/15/92 DTD 8/01/84 FC 2/01/85 MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.0000	4,300.00
1	200		BROWNING FERRIS INDS INC	23.1250	4,625.00
1	200		IHOP CORP NEW	16.7500	3,350.00
1	100		MC DONALDS CORP	40.5000	4,050.00
1	200		MYLAN LABORATORIES INC	33.8750	6,775.00
1	500		PICCADILLY CAFETERIAS	10.5000	5,250.00
1	100		U S BIOSCIENCE	14.8750	1,487.50
			FIXED INCOME SECURITIES		
1	3000		MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV CPN 0.000% DUE 3/15/92 DTD 8/01/84 FC 2/01/85	32.2550	967.65
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.2550	1,290.20
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.6510	4,825.50
			VALUE OF PRICED SECURITIES		36,920.85
MF	2993.224		MFS GOVT INCOME PLUS TR (AS OF 2/21)	6.8000	20,353.92

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1-92-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD C RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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110 1/2 MAIN ST
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25801-4611

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NICK JOE RAHALL II AS CUST FOR
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25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	3

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IF YOU ARE ROLLING OVER AN IRA OR HAVE CDS
MATURING SOON, ASK YOUR FINANCIAL CONSULTANT
FOR SUGGESTIONS ABOUT CONSERVATIVE ALTERNATIVE
INVESTMENTS THAT MAY PAY CONSIDERABLY MORE THAN
WHAT YOU ARE PRESENTLY RECEIVING.

---END OF STATEMENT---

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Wheat First Securities | **Butcher & Singer**

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$38,441.54		$49,202.50	$87,644.04

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	20,102.6908	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	51,989.21	49,202.50
TOTAL MONEY MARKET		49,202.50

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	111.00CR
GSP DIVIDENDS CREDITED	109.89CR	350.05CR
AVERAGE YIELD ON MONEY MARKET	2/19/92 TO 3/16/92	3.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 02	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,452.41
3 03	1	SALE	200-	MYLAN LABORATORIES INC	34.0000		6,645.66
3 03	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,849.44
3 04	1	PURCHASE	100	U S BIOSCIENCE	16.8750	1,738.62	
3 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,800.84
3 11	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,907.04	
3 12	1	PURCHASE	200	AMER HEALTH PROPERTIES INC	28.7500	5,889.03	
3 16	1	REDEMPTION	3000-	MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV CPN 0.000% DUE 3/15/92 DTD 8/01/84 FC 2/01/85			
3 16	1	REDEMPTION		MISSOURI ST HSG DEV XXX			895.62

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7-91-003 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
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25801-4611

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 17	1	SALE	3019.271-	MFS GOVT INCOME PLUS - TRUST $B1 AS OF 3/16/92	6.7100		20,249.31
3 17	1	DIVIDEND	109.89	REINVESTED DIVIDEND GSP AS OF 3/16/92			
3 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	895.62	
3 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,889.03
3 23	1	RECEIVED	3019.271	MFS GOVT INCOME PLUS - TRUST $B1			
3 24	1	PURCHASE	100	AMER HEALTH PROPERTIES INC	28.8750	2,956.85	
3 24	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	20,249.31	
3 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,956.85

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.5000	4,350.00
1	300		AMER HEALTH PROPERTIES INC	29.2500	8,775.00
1	200		BROWNING FERRIS INDS INC	21.7500	4,350.00
1	200		IHOP CORP NEW	15.7500	3,150.00
1	100		MC DONALDS CORP	39.8750	3,987.50
1	500		PICCADILLY CAFETERIAS	9.7500	4,875.00
1	200		U S BIOSCIENCE	14.0000	2,800.00
			FIXED INCOME SECURITIES		
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.2510	1,290.04
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7280	4,864.00
			VALUE OF PRICED SECURITIES		38,441.54

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7-02-003 WWBLR 25

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8X08 6540-070D	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
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25801-4611

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STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	3

INTRODUCING THE CAMBRIDGE FAMILY OF FUNDS, A FINANCIAL RESOURCE THAT YOU CAN USE THROUGHOUT YOUR LIFE TO PURSUE YOUR MAJOR FINANCIAL GOALS. SEE PAGE 3 OF THE ENCLOSED INVESTOR'S SPECTRUM, THEN CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER DETAILS.

---END OF STATEMENT---

7-89-009 WWBLR 2X

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$37,371.56	$4,363.13CR	$44,396.30	$86,130.99

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	4,363.13CR
NET CLOSING BALANCE		4,363.13CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	49,202.50	44,396.30
TOTAL MONEY MARKET		44,396.30

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	94.00CR	205.00CR
GSP DIVIDENDS CREDITED	127.82CR	477.87CR
AVERAGE YIELD ON MONEY MARKET	3/17/92 TO 4/15/92	3.48%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
4 02	1	PURCHASE	300	SERAGEN INC	12.2500	3,790.61	
4 02	1	PURCHASE	100	U S BIOSCIENCE	13.7500	1,42[illegible]	
4 06	1	PURCHASE	200	RAUCH INDS INC	16.0000	3,203.50	
4 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 200			34.00
4 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	60.00	
4 09	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,162.10
4 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,203.50
4 14	1	SALE	200-	IHOP CORP NEW	17.3750		3,391.58
4 16	1	DIVIDEND	127.82	REINVESTED DIVIDEND GSP			

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1-91-002 WWBLR 4[illegible]

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

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BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 4/15/92			
4 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,391.58	
4 30	1	SALE	100-	MC DONALDS CORP	44.5000		4,363.13

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	41.5000	4,150.00
1	300		AMER HEALTH PROPERTIES INC	29.6250	8,887.50
1	200		BROWNING FERRIS INDS INC	21.7500	4,350.00
1	500		PICCADILLY CAFETERIAS	9.7500	4,875.00
1	200		RAUCH INDS INC	16.0000	3,200.00
1	300		SERAGEN INC	8.7500	2,625.00
1	300		U S BIOSCIENCE	10.3750	3,112.50
			FIXED INCOME SECURITIES		
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.2140	1,288.56
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7660	4,883.00
			VALUE OF PRICED SECURITIES		37,371.56

HAVE YOU TAKEN ADVANTAGE OF THE RECENT ENHANCEMENTS TO THE CASH RESOURCES ACCOUNT? FOR MORE INFORMATION, PLEASE SEE THIS MONTH'S INVESTOR'S SPECTRUM. IF YOU DO NOT HAVE A CRA ACCOUNT, CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$57,277.82	$19,331.84DB	$48,137.13	$86,083.11

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	19,331.84DB
NET CLOSING BALANCE		19,331.84DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	49,859.81	48,137.13
TOTAL MONEY MARKET		48,137.13

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	6.00CR	432.50CR
GSP DIVIDENDS CREDITED	126.76CR	721.57CR
AVERAGE YIELD ON MONEY MARKET	5/16/92 TO	6/15/92 3.14%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 03	1	PURCHASE	100	QUALCOMM INC	19.2500	1,985.50	
6 08	1	STOCK DIV	100	RAUCH INDS INC			
6 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,986.60
6 16	1	DIVIDEND	126.76	REINVESTED DIVIDEND GSP AS OF 6/15/92			
6 24	1	DEPOSIT		FUNDS RECD			131.16
6 26	1	DIVIDEND		RAUCH INDS INC QUANTITY 300			6.00
6 26	1	PURCHASE	100	CLOROX COMPANY	43.6250	4,463.22	
6 26	1	PURCHASE	100	PROCTER & GAMBLE CO	46.3750	4,741.02	
6 26	1	PURCHASE	200	SYNTEX CORPORATION E	32.3750	6,624.44	
6 26	1	PURCHASE	200	TYSON FOODS INC CL A	17.0000	3,503.16	
6 30	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	137.16	

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3-01-002 WWBLR 1

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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25801-4611

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	41.7500	4,175.00
1	200		BROWNING FERRIS INDS INC	22.0000	4,400.00
1	100		CLOROX COMPANY	45.3750	4,537.50
1	500		PICCADILLY CAFETERIAS	10.3750	5,187.50
1	100		PROCTER & GAMBLE CO	46.0000	4,600.00
1	100		QUALCOMM INC	19.5000	1,950.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SBARRO INC	23.7500	7,125.00
1	300		SERAGEN INC	8.5000	2,550.00
1	200		SYNTEX CORPORATION E	34.2500	6,850.00
1	200		TYSON FOODS INC CL A	17.1250	3,425.00
1	300		U S BIOSCIENCE	10.3750	3,112.50
			FIXED INCOME SECURITIES		
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.5830	1,303.32
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.9740	4,987.00
			VALUE OF PRICED SECURITIES		57,277.82

OUR CONSOLIDATED STATEMENT OF FINANCIAL CONDITION
FOR THE FISCAL YEAR ENDED MARCH 31, 1992 IS ENCLOSED
IN LIEU OF THE INVESTOR'S SPECTRUM. THE NEXT ISSUE
OF THE INVESTOR'S SPECTRUM WILL BE IN THE JULY
STATEMENTS, WHICH WILL BE MAILED EARLY IN AUGUST.

---END OF STATEMENT---

3-02-002 WWBLR 15

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25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$36,639.66		$49,859.81	$86,499.47

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,363.13CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	44,396.30	49,859.81
TOTAL MONEY MARKET		49,859.81

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	221.50CR	426.50CR
GSP DIVIDENDS CREDITED	116.94CR	594.81CR
AVERAGE YIELD ON MONEY MARKET	4/16/92 TO 5/15/92	3.27%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 12	1	PURCHASE	100	SBARRO INC	31.0000	3,181.96	
5 12	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,363.13	
5 15	1	PURCHASE	100	SBARRO INC	24.8750	2,560.46	
5 18	1	DIVIDEND	116.94	REINVESTED DIVIDEND GSP AS OF 5/15/92			
5 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,181.96
5 20	1	SALE	300-	AMER HEALTH PROPERTIES INC	30.6250		9,013.81
5 20	1	PURCHASE	100	SBARRO INC	24.3750	2,509.45	
5 22	1	DIVIDEND		AMER HEALTH PROPERTIES INC QUANTITY 300			205.50
5 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,560.46

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3-91-002 WWBLR 474

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BKOB 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 26	1	DIVIDEND		ALBERTSONS INC QUANTITY 100			16.00
5 26	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	205.50	
5 29	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,520.36	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	39.1250	3,912.50
1	200		BROWNING FERRIS INDS INC	20.7500	4,150.00
1	500		PICCADILLY CAFETERIAS	11.7500	5,875.00
1	200		RAUCH INDS INC	15.7500	3,150.00
1	300		SBARRO INC	22.6250	6,787.50
1	300		SERAGEN INC	10.2500	3,075.00
1	300		U S BIOSCIENCE	11.5000	3,450.00
			FIXED INCOME SECURITIES		
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.3790	1,295.16
1	50000		WEST VIRGINIA ST HOUSING CCV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.8890	4,944.50
			VALUE OF PRICED SECURITIES		36,639.66

SUMMERTIME IS ALWAYS A GOOD TIME TO TAKE A LOOK AT YOUR INVESTMENT PORTFOLIO TO BE SURE IT IS ON TARGET WITH YOUR CURRENT INVESTMENT OBJECTIVES. IF YOU WOULD LIKE TO REVIEW YOUR INVESTMENTS, PLEASE CALL YOUR FINANCIAL CONSULTANT FOR AN APPOINTMENT.

---END OF STATEMENT---

3-02-002 WWBLR 4

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$44,632.26	$5,976.92CR	$31,624.33	$82,433.51

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	19,331.84DB	5,976.92CR
NET CLOSING BALANCE		5,976.92CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	48,137.13	31,624.33
TOTAL MONEY MARKET		31,624.33

INCOME AND EXPENSE	CURRENT PERIOD	YEAR.TO DATE
CASH DIVIDENDS CREDITED	94.00CR	526.50CR
GSP DIVIDENDS CREDITED	103.82CR	825.39CR
AVERAGE YIELD ON MONEY MARKET	6/16/92 TO	7/15/92 2.96%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
7 06	1	SALE	100-	CLOROX COMPANY	47.2500		4,636.84
7 06	1	SALE	200-	SYNTEX CORPORATION E	34.5000		6,762.89
7 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		19,271.84
7 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 200			34.00
7 07	1	PURCHASE	200	MARION MERRELL DOW INC	27.2500	5,584.72	
7 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,849.01	
7 15	1	SALE	100-	PROCTER & GAMBLE CO	50.3750		4,944.16
7 16	1	DIVIDEND	103.82	REINVESTED DIVIDEND GSP AS OF 7/15/92			
7 22	1	PURCHASE	100	QUALCOMM INC	15.2500	1,576.52	

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 23	1	SALE	200-	MARION MERRELL DOW INC	28.7500		5,634.40
7 23	1	PURCHASE	200	ZWEIG FUND INC	12.7500	2,640.53	
7 24	1	PURCHASE	10000	COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BO-11/15/02-REG DUE 11/15/02	45.4980	4,553.30	
7 27	1	PURCHASE	493.097	COLONIAL TR VI U S FD - FOR GROWTH CL B AS OF 7/24/92	10.1400	5,000.00	
7 27	1	SALE	200-	PICCADILLY CAFETERIAS	11.5000		2,231.27
7 27	1	SALE	200-	TYSON FOODS INC CL A	19.2500		3,745.65
7 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,365.64	
7 31	1	TO PLAN ACCT	493.097-	COLONIAL TR VI U S FD - FOR GROWTH CL B			
7 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,559.43

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.0000	4,300.00
1	200		BROWNING FERRIS INDS INC	22.7500	4,550.00
1	300		PICCADILLY CAFETERIAS	11.5000	3,450.00
1	200		QUALCOMM INC	17.7500	3,550.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SBARRO INC	21.3750	6,412.50
1	300		SERAGEN INC	9.0000	2,700.00
1	300		U S BIOSCIENCE	10.0000	3,000.00
1	200		ZWEIG FUND INC	13.0000	2,600.00
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BO-11/15/02-REG DUE 11/15/02	47.3420	4,734.20
1	4000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTO 9/15/82	32.9890	1,319.56

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S-02-003 WWBLR 47(

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8408 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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25801-4611

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2820	5,141.00
			VALUE OF PRICED SECURITIES		44,832.26

IF YOU HAD MUNICIPAL BONDS CALLED RECENTLY,
OR EXPECT TO HAVE MUNICIPAL BONDS CALLED IN THE
FUTURE, WE SUGGEST READING THE ARTICLE ON PAGE 3
OF INVESTOR'S SPECTRUM INCLUDED WITH THIS STATEMENT.
FOR MORE INFORMATION, CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

5-89-003 WWBLR 47

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$75,067.24	$4,954.07CR	$848.40	$80,869.71

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	5,976.92CR	4,954.07CR
NET CLOSING BALANCE		4,954.07CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	31,624.33	848.40
TOTAL MONEY MARKET		848.40

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	16.00CR	542.50CR
GSP DIVIDENDS CREDITED	86.82CR	912.21CR
AVERAGE YIELD ON MONEY MARKET	7/16/92 TO	8/17/92 2.66%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,976.92	
8 12	1	PURCHASE	100	PROCTER & GAMBLE CO	47.6250	4,866.02	
8 14	1	PURCHASE	100	MARION MERRELL DOW INC	28.7500	2,953.62	
8 14	1	PURCHASE	100	SYNTEX CORPORATION E	30.3750	3,118.54	
8 14	1	PURCHASE	200	WASTE MANAGEMENT INC	33.3750	6,827.31	
8 14	1	PURCHASE	100	ZWEIG FUND INC	13.1250	1,361.73	
8 17	1	PURCHASE	100	MC DONALDS CORP	42.6250	4,361.73	
8 18	1	DIVIDEND	86.82	REINVESTED DIVIDEND GSP AS OF 8/17/92			
8 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,866.02
8 21	1	EXCHANGE	3000-	MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL			

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2-01-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				CPN 0.000% DUE 9/15/02 DTD 9/15/82			
8 21	1	EXCHANGE	3000	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 DTD 9/15/82			
8 21	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		14,261.20
8 24	1	PURCHASE	100	AMERICAN TELEPHONE AND TELEGRAPH CO	42.5000	4,349.05	
8 24	1	PURCHASE	100	EASTMAN KODAK COMPANY	43.3750	4,437.85	
8 24	1	PURCHASE	100	GANNETT CO INC DEL	44.8750	4,579.82	
8 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,361.73
8 25	1	DIVIDEND		ALBERTSONS INC QUANTITY 100			16.00
8 25	1	SALE	200-	BROWNING FERRIS INDS INC	21.6250		4,237.18
8 25	1	SALE	300-	PICCADILLY CAFETERIAS	11.2500		3,291.64
8 28	1	PURCHASE	100	MIRAGE RESORTS INC	25.1250	2,574.75	
8 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		13,350.72

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION		PRICE	VALUE
			EQUITIES AND OPTIONS			
1	100		ALBERTSONS INC		43.2500	4,325.00
1	100		AMERICAN TELEPHONE AND TELEGRAPH CO		42.2500	4,225.00
1	100		EASTMAN KODAK COMPANY		44.2500	4,425.00
1	100		GANNETT CO INC DEL		47.0000	4,700.00
1	100		MARION MERRELL DOW INC		27.7500	2,775.00
1	100		MC DONALDS CORP		42.5000	4,250.00
1	100		MIRAGE RESORTS INC		25.2500	2,525.00
1	100		PROCTER & GAMBLE CO		46.8750	4,687.50
1	200		QUALCOMM INC		15.3750	3,075.00
1	300		RAUCH INDS INC		10.2500	3,075.00
1	300		SBARRO INC		25.2500	7,575.00
1	300		SERAGEN INC		8.2500	2,475.00
1	100		SYNTEX CORPORATION	E	28.7500	2,875.00
1	300		U S BIOSCIENCE		7.6250	2,287.50
1	200		WASTE MANAGEMENT INC		33.1250	6,625.00
1	300		ZWEIG FUND INC		13.0000	3,900.00

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2-92-400 WWSLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BD-11/15/02-REG DUE 11/15/02	47.9150	4,791.50
1	1000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	33.3310	333.31
1	3000		MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 DTD 9/15/82	33.3310	999.93
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2850	5,142.50
			VALUE OF PRICED SECURITIES		75,067.24

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
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25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$63,814.52	$2,243.37DB	$21,093.52	$82,664.67

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,954.07CR	2,243.37DB
NET CLOSING BALANCE		2,243.37DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	848.40	21,093.52
TOTAL MONEY MARKET		21,093.52

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	16.00CR	558.50CR
GSP DIVIDENDS CREDITED	24.47CR	936.68CR
AVERAGE YIELD ON MONEY MARKET	8/18/92 TO 9/15/92	2.57%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 02	1	SALE	200-	SBARRO INC	27.8750		5,458.77
9 02	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,528.82	
9 03	1	PURCHASE	100	ANHEUSER BUSCH COS INC	53.7500	5,463.00	
9 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,574.75
9 10	1	SALE	100-	ALBERTSONS INC	45.3750		4,449.52
9 11	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4.23
9 14	1	SALE	100-	MIRAGE RESORTS INC	27.8750		2,710.08
9 15	1	REDEMPTION	3000-	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 DTD 9/15/82			
9 15	1	REDEMPTION		MISSOURI ST HSG DEV CXXX			948.69

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3-01-000 WWBLR 1

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 15	1	DIVIDEND	24.47	REINVESTED DIVIDEND GSP AS OF 9/15/92			
9 18	1	DIVIDEND		MC DONALDS CORP QUANTITY 100			10.00
9 18	1	SALE	200-	WASTE MANAGEMENT INC	36.5000		7,146.52
9 18	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,398.21	
9 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,720.08	
9 25	1	DIVIDEND		RAUCH INDS INC QUANTITY 300			6.00
9 28	1	PURCHASE	100	AMER CYANAMID CO	54.6250	5,560.85	
9 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,152.52	
9 30	1	SALE	200-	QUALCOMM INC	17.0000		3,317.48

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		AMER CYANAMID CO	56.5000	5,650.00
1	100		AMERICAN TELEPHONE AND TELEGRAPH CO	43.6250	4,362.50
1	100		ANHEUSER BUSCH COS INC	55.5000	5,550.00
1	100		EASTMAN KODAK COMPANY	44.5000	4,450.00
1	100		GANNETT CO INC DEL	48.0000	4,800.00
1	100		MARION MERRELL DOW INC	26.1250	2,612.50
1	100		MC DONALDS CORP	44.3750	4,437.50
1	100		PROCTER & GAMBLE CO	49.3750	4,937.50
1	300		RAUCH INDS INC	10.7500	3,225.00
1	100		SBARRO INC	26.6250	2,662.50
1	300		SERAGEN INC	7.0000	2,100.00
1	100		SYNTEX CORPORATION E	27.0000	2,700.00
1	300		U S BIOSCIENCE	7.2500	2,175.00
1	300		ZWEIG FUND INC	12.7500	3,825.00
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BD-11/15/02-REG DUE 11/15/02	49.5340	4,953.40

---CONTINUED ON NEXT PAGE---

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
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CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
:	1000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	34.2120	342.12
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.0630	5,031.50
			VALUE OF PRICED SECURITIES		63,814.52

IF THE YIELD ON YOUR CDS IS DISAPPOINTING,
WHY NOT CALL YOUR FINANCIAL CONSULTANT FOR A COPY
OF OUR NEW BOOKLET "SIX WAYS TO EARN SIX PERCENT OR
MORE?" IT CARRIES A WEALTH OF INFORMATION FOR
CONSERVATIVE INVESTORS. SEE LEAFLET ENCLOSED.

---END OF STATEMENT---

5-03-003 WWBLR 11

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL

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NICK JOE RAHALL II AS CUST FOR
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122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$60,557.08	$9,625.30CR	$16,150.56	$86,332.94

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	2,243.37DB	9,625.30CR
NET CLOSING BALANCE		9,625.30CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	21,093.52	16,150.56
TOTAL MONEY MARKET		16,150.56

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	217.00CR	775.50CR
GSP DIVIDENDS CREDITED	29.08CR	965.76CR
AVERAGE YIELD ON MONEY MARKET	9/16/92 TO 10/15/92	2.42%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		EASTMAN KODAK COMPANY QUANTITY 100			50.00
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 100			32.00
10 01	1	DIVIDEND		WASTE MANAGEMENT INC QUANTITY 200			26.00
10 05	1	PURCHASE	100	BRISTOL MYERS SQUIBB CO	61.5000	6,243.17	
10 05	1	PURCHASE	100	SYNTEX CORPORATION E	24.6250	2,524.09	
10 05	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,452.85
10 07	1	PURCHASE	50	INTERNATIONAL BUSINESS MACHINE CORP	78.5000	4,003.20	
10 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,449.78
10 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,003.20
10 16	1	DIVIDEND	29.08	REINVESTED DIVIDEND GSP			

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
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SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 10/15/92			
10 19	1	SALE	100-	GANNETT CO INC DEL	49.0000		4,810.80
10 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,649.00
10 19	1	DEPOSIT		SHEARSON LEHMAN BROTHERS			5,000.00
10 20	1	SALE	100-	PROCTER & GAMBLE CO	51.8750		5,088.97
10 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,000.00	
10 20	1	CHECK ISSUED		CHECK ISSUED #13221399 MMKT WITHDRAWAL		1,649.00	
10 23	1	PURCHASE	300	MORGAN GRENFELL SMALL CAP FUND INC	11.1250	3,425.98	
10 26	1	DIVIDEND		ZWEIG FUND INC QUANTITY 300			84.00
10 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,894.80	
10 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,088.97	
10 29	1	DIVIDEND		MARION MERRELL DOW INC QUANTITY 100			25.00
10 29	1	SALE	100-	BRISTOL MYERS SQUIBB CO	67.3750		6,640.99
10 29	1	SALE	300-	RAUCH INDS INC	10.2500		2,984.31
10 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,400.98

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		AMER CYANAMID CO	56.5000	5,650.00
1	100		AMERICAN TELEPHONE AND TELEGRAPH CO	43.6250	4,362.50
1	100		ANHEUSER BUSCH COS INC	56.7500	5,675.00
1	100		EASTMAN KODAK COMPANY	40.8750	4,087.50
1	50		INTERNATIONAL BUSINESS MACHINE CORP	66.8750	3,343.75
1	100		MARION MERRELL DOW INC	25.5000	2,550.00
1	100		MC DONALDS CORP	45.8750	4,587.50
1	300		MORGAN GRENFELL SMALL CAP FUND INC	11.3750	3,412.50
1	100		SBARRO INC	25.0000	2,500.00
1	300		SERAGEN INC	10.7500	3,225.00
1	200		SYNTEX CORPORATION E	25.0000	5,000.00

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BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD O RAHALL

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122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	300		U S BIOSCIENCE	7.3750	2,212.50
1	300		ZWEIG FUND INC	12.5000	3,750.00
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BO-11/15/02-REG DUE 11/15/02	47.9670	4,796.70
1	1000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.9630	329.63
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.1490	5,074.50
			VALUE OF PRICED SECURITIES		60,557.08

WITH JUST TWO MONTHS REMAINING BEFORE THE END OF THE YEAR, IT'S IMPORTANT TO THINK ABOUT PORTFOLIO AND PERSONAL EXPENSE ADJUSTMENTS TO HELP REDUCE INCOME TAXES. SEE CHUCK AULINO'S ARTICLE ON YEAR-END TAX STRATEGIES IN THE INVESTOR'S SPECTRUM ENCLOSED.

---END OF STATEMENT---

0-00-000 WWBLR 3

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8K08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$35,023.33	$3,570.82CR	$48,728.35	$87,322.50

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	9,625.30CR	3,570.82CR
NET CLOSING BALANCE		3,570.82CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	16,150.56	48,728.35
TOTAL MONEY MARKET		48,728.35

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	60.50CR	836.00CR
GSP DIVIDENDS CREDITED	39.49CR	1,005.25CR
AVERAGE YIELD ON MONEY MARKET 10/16/92 TO 11/16/92		2.39%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 02	1	DIVIDEND		AMERICAN TELEPHONE AND TELEGRAPH CO QUANTITY 100			33.00
11 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	33.00	
11 04	1	SALE	100-	AMER CYANAMID CO	57.3750		5,644.13
11 04	1	SALE	100-	ANHEUSER BUSCH COS INC	57.1250		5,619.13
11 04	1	SALE	100-	SBARRO INC	27.1250		2,651.43
11 06	1	SALE	100-	MC DONALDS CORP	46.1250		4,516.06
11 06	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,625.30	
11 11	1	SALE	100-	AMERICAN TELEPHONE AND TELEGRAPH CO	45.1250		4,421.75
11 13	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	13,914.69	
11 16	1	DIVIDEND		PROCTER & GAMBLE CO			27.50

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2-01-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

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ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
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SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				QUANTITY 100			
11 17	1	DIVIDEND	39.49	REINVESTED DIVIDEND GSP AS OF 11/16/92			
11 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,543.56	
11 24	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,421.75	
11 25	1	SALE	300-	MORGAN GRENFELL SMALL CAP FUND INC	12.2500		3,570.82

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		EASTMAN KODAK COMPANY	41.8750	4,187.50
1	50		INTERNATIONAL BUSINESS MACHINE CORP	68.2500	3,412.50
1	100		MARION MERRELL DOW INC	25.7500	2,575.00
1	300		SERAGEN INC	11.5000	3,450.00
1	200		SYNTEX CORPORATION E	22.1250	4,425.00
1	300		U S BIOSCIENCE	9.6250	2,887.50
1	300		ZWEIG FUND INC	12.8750	3,862.50
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BO-11/15/02-REG DUE 11/15/02	47.7590	4,775.90
1	1000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.8930	328.93
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV 0Y-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2370	5,118.50
			VALUE OF PRICED SECURITIES		35,023.33

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2-02-003 WWBLR

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NOW THAT THE NATIONAL ELECTIONS HAVE BEEN DECIDED,
ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING
MARKET OPPORTUNITIES? TO BE SURE, WHY NOT REVIEW
YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT?
CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

2-93-005 WWSLR

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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$37,895.17	$5,355.08DB	$54,990.58	$87,530.67

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	3,570.82CR	5,355.08DB
NET CLOSING BALANCE		5,355.08DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	48,728.35	54,990.58
TOTAL MONEY MARKET		54,990.58

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	144.50CR	980.50CR
GSP DIVIDENDS CREDITED	159.41CR	1,164.66CR
AVERAGE YIELD ON MONEY MARKET 11/17/92 TO 12/31/92		2.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 07	1	DIVIDEND		SYNTEX CORPORATION E QUANTITY 200			52.00
12 08	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,622.82	
12 09	1	DIVIDEND		ANHEUSER BUSCH COS INC QUANTITY 100			32.00
12 09	1	SALE	100-	U S BIOSCIENCE	12.7500		1,233.75
12 10	1	DIVIDEND		INTERNATIONAL BUSINESS MACHINE CORP QUANTITY 50			60.50
12 10	1	SALE	100-	SERAGEN INC	11.9375		1,153.75
12 15	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	92.50	
12 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,387.50	
12 23	1	SALE	200-	SERAGEN INC	11.7500		2,280.47
12 28	1	PURCHASE	100	IMCERA GROUP INC	33.7500	3,461.05	
12 29	1	PURCHASE	150	LUBRIZOL CORP	27.0000	4,174.50	
12 31	1	DIVIDEND	159.41	REINVESTED DIVIDEND GSP			

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23218

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0700	232-06-2218	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		EASTMAN KODAK COMPANY	40.5000	4,050.00
1	100		IMCERA GROUP INC	33.7500	3,375.00
1	50		INTERNATIONAL BUSINESS MACHINE CORP	50.3750	2,518.75
1	150		LUBRIZOL CORP	27.2500	4,087.50
1	100		MARION MERRELL DOW INC	26.0000	2,600.00
1	200		SYNTEX CORPORATION E	23.0000	4,600.00
1	200		U S BIOSCIENCE	11.1250	2,225.00
1	300		ZWEIG FUND INC	13.0000	3,900.00
			FIXED INCOME SECURITIES		
1	10000		COUGARS-SER 2-CPN-INT PMT ON 12.375% 2004 T/BD-11/15/02-REG DUE 11/15/02	49.3620	4,936.20
1	1000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.9220	329.22
1	50000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV DY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.5470	5,273.50
			VALUE OF PRICED SECURITIES		37,895.17

WE APPRECIATE YOUR PATRONAGE THE PAST YEAR AND LOOK FORWARD TO SERVING YOU IN 1993. TO ENSURE THE ACCURACY OF OUR RECORDS AND THOSE REQUIRED BY THE IRS, PLEASE VERIFY THE TAX ID NUMBER ON THIS STATEMENT. IF INCORRECT, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

4-02-002 WWBLR 1

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

#2

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$29,929.53		$78,701.09	$108,630.14

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	17,033.97CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	61,465.51	78,701.09
TOTAL MONEY MARKET		78,701.09

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	94.00CR	94.00CR
GSP DIVIDENDS CREDITED	107.61CR	107.61CR
AVERAGE YIELD ON MONEY MARKET	1/01/92 TO 1/15/92	3.81%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 02	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
1 02	1	JOURNAL	20	GLAXO HOLDINGS PLC ADR F SPONSORED FR 65398600 A/O 12/31			
1 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	8,110.15	
1 07	1	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 200			34.00
1 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,697.20	
1 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,320.62	
1 16	1	DIVIDEND	107.61	REINVESTED DIVIDEND GSP AS OF 1/15/92			

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2-92-000 WWBLR 3K

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		BRITISH PETE PLC AM SH F	62.6250	6,262.50
1	20		GLAXO HOLDINGS PLC ADR F SPONSORED	30.7500	615.00
1	500		PICCADILLY CAFETERIAS	9.2500	4,625.00
			FIXED INCOME SECURITIES		
1	12000		MISSOURI ST HSO DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	31.0250	3,723.00
1	35000		OAK RIDGE TENN INDL DEV BRO MTO REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.3990	6,089.65
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.5710	8,613.90
			VALUE OF PRICED SECURITIES		29,929.05
MF	4465.035		MFS GOVT INCOME PLUS TR (AS OF 1/24)	6.9400	30,987.34

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

TO INSURE ACCURACY FOR OUR RECORDS AND THOSE REQUIRED BY THE INTERNAL REVENUE SERVICE, PLEASE VERIFY THAT THE TAX ID NUMBER LISTED ON THIS STATEMENT IS CORRECT. SHOULD A DISCREPANCY EXIST, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

2-00-009 WWBLR 3E

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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601 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$45,606.50	$15,905.87DB	$79,535.34	$109,235.97

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	15,905.87DB
NET CLOSING BALANCE		15,905.87DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	78,701.09	79,535.34
TOTAL MONEY MARKET		79,535.34

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	94.00CR
GSP DIVIDENDS CREDITED	266.78CR	374.39CR
AVERAGE YIELD ON MONEY MARKET	1/16/92 TO	2/18/92 3.62%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 07	1	SALE	20-	GLAXO HOLDINGS PLC ADR F SPONSORED	30.3750		567.47
2 18	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	567.47	
2 19	1	DIVIDEND	266.78	REINVESTED DIVIDEND GSP AS OF 2/18/92			
2 24	1	PURCHASE	200	IHOP CORP NEW	16.7500	3,452.41	
2 25	1	PURCHASE	100	ALBERTSONS INC	42.8750	4,377.15	
2 25	1	PURCHASE	200	MYLAN LABORATORIES INC	31.6250	6,472.29	
2 26	1	PURCHASE	100	U S BIOSCIENCE	15.5000	1,604.02	
2 28	1	EXCHANGE	4000	MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV CPN 0.000% DUE 3/15/92			

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7-91-000 WWBLR 4C

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 28	1	EXCHANGE	4000-	DTD 8/01/84 FC 2/01/85 MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.0000	4,300.00
1	100		BRITISH PETE PLC AM SH F	57.6250	5,762.50
1	200		IHOP CORP NEW	16.7500	3,350.00
1	200		MYLAN LABORATORIES INC	33.8750	6,775.00
1	500		PICCADILLY CAFETERIAS	10.5000	5,250.00
1	100		U S BIOSCIENCE	14.8750	1,487.50
			FIXED INCOME SECURITIES		
1	4000		MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV CPN 0.000% DUE 3/15/92 DTD 8/01/84 FC 2/01/85	32.2550	1,290.20
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.2550	2,580.40
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.5000	6,125.00
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.6510	8,685.90
			VALUE OF PRICED SECURITIES		45,606.50

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
MF	4503.270		MFS GOVT INCOME PLUS TR (AS OF 2/21)	6.8000	30,622.23

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IF YOU ARE ROLLING OVER AN IRA OR HAVE CDS MATURING SOON, ASK YOUR FINANCIAL CONSULTANT FOR SUGGESTIONS ABOUT CONSERVATIVE ALTERNATIVE INVESTMENTS THAT MAY PAY CONSIDERABLY MORE THAN WHAT YOU ARE PRESENTLY RECEIVING.

---END OF STATEMENT---

7-03-003 WWBLR 4.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$46,265.73		$66,540.94	$112,806.67

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	15,905.8708	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	79,535.34	66,540.94
TOTAL MONEY MARKET		66,540.94

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	94.00CR
GSP DIVIDENDS CREDITED	186.26CR	560.65CR
AVERAGE YIELD ON MONEY MARKET	2/19/92 TO 3/16/92	3.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 02	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,452.41
3 03	1	SALE	200-	MYLAN LABORATORIES INC	34.0000		6,645.66
3 03	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,849.44
3 04	1	PURCHASE	100	U S BIOSCIENCE	16.8750	1,738.62	
3 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,604.02
3 11	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,907.04	
3 12	1	PURCHASE	200	AMER HEALTH PROPERTIES INC	28.7500	5,889.03	
3 16	1	REDEMPTION	4000-	MISSOURI ST HSG DEV XXX SUBMITTED PARTIAL CALL REV CPN 0.000% DUE 3/15/92 DTD 8/01/84 FC 2/01/85			
3 16	1	REDEMPTION		MISSOURI ST HSG DEV XXX			1,194.16

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6-91-003 WWBLR 25

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BA08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 17	1	PURCHASE	3448.276	COLONIAL U S GOVT TR - TRUST FUND AS OF 3/16/92	7.2500	25,000.00	
3 17	1	SALE	4542.457-	MFS GOVT INCOME PLUS - TRUST SBI AS OF 3/16/92	6.7100		30,469.89
3 17	1	DIVIDEND	186.26	REINVESTED DIVIDEND GSP AS OF 3/16/92			
3 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	1,194.16	
3 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,889.03
3 23	1	RECEIVED	4542.457	MFS GOVT INCOME PLUS - TRUST SBI			
3 24	1	PURCHASE	100	AMER HEALTH PROPERTIES INC	28.8750	2,956.85	
3 24	1	DELIVERED	3448.276-	COLONIAL U S GOVT TR - TRUST FUND			
3 24	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,469.89	
3 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,956.85

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.5000	4,350.00
1	300		AMER HEALTH PROPERTIES INC	29.2500	8,775.00
1	100		BRITISH PETE PLC AM SH F	53.5000	5,350.00
1	200		IHOP CORP NEW	15.7500	3,150.00
1	500		PICCADILLY CAFETERIAS	9.7500	4,875.00
1	200		U S BIOSCIENCE	14.0000	2,800.00
			FIXED INCOME SECURITIES		
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.2510	2,580.08

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S-02-000 WWSLR 25K

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.0870	5,630.45
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7280	8,755.20
			VALUE OF PRICED SECURITIES		46,265.73

INTRODUCING THE CAMBRIDGE FAMILY OF FUNDS, A FINANCIAL RESOURCE THAT YOU CAN USE THROUGHOUT YOUR LIFE TO PURSUE YOUR MAJOR FINANCIAL GOALS. SEE PAGE 3 OF THE ENCLOSED INVESTOR'S SPECTRUM, THEN CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER DETAILS.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$43,837.87	$5,729.48CR	$61,760.04	$111,327.39

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	5,729.48CR
NET CLOSING BALANCE		5,729.48CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	66,540.94	61,760.04
TOTAL MONEY MARKET		61,760.04

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	60.00CR	154.00CR
GSP DIVIDENDS CREDITED	187.12CR	747.77CR
AVERAGE YIELD ON MONEY MARKET	3/17/92 TO	4/15/92 3.48%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
4 02	1	PURCHASE	300	SERAGEN INC	12.2500	3,790.61	
4 02	1	PURCHASE	100	U S BIOSCIENCE	13.7500	1,425.49	
4 06	1	PURCHASE	200	RAUCH INDS INC	16.0000	3,203.50	
4 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	60.00	
4 09	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,216.10
4 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,203.50
4 14	1	SALE	200-	IHOP CORP NEW	17.3750		3,391.58
4 16	1	DIVIDEND	187.12	REINVESTED DIVIDEND GSP AS OF 4/15/92			

---CONTINUED ON NEXT PAGE---

7-01-002 WWELR 4

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
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STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,391.58	
4 30	1	SALE	100-	BRITISH PETE PLC AM SH F	58.1250		5,729.48

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	41.5000	4,150.00
1	300		AMER HEALTH PROPERTIES INC	29.6250	8,887.50
1	500		PICCADILLY CAFETERIAS	9.7500	4,875.00
1	200		RAUCH INDS INC	16.0000	3,200.00
1	300		SERAGEN INC	[illegible]	2,625.00
1	300		U S BIOSCIENCE	10.3750	3,112.50
			FIXED INCOME SECURITIES		
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	[illegible]	2,577.12
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.0610	5,621.35
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7660	8,789.40
			VALUE OF PRICED SECURITIES		43,837.87

HAVE YOU TAKEN ADVANTAGE OF THE RECENT ENHANCEMENTS TO THE CASH RESOURCES ACCOUNT? FOR MORE INFORMATION, PLEASE SEE THIS MONTH'S INVESTOR'S SPECTRUM. IF YOU DO NOT HAVE A CRA ACCOUNT, CONTACT YOUR FINANCIAL CONSULTANT.

7-92-462 WWBLR 46

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$57,302.94	$12,707.4008	$67,079.33	$111,674.87

ACCOUNT BALANCE($)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	12,707.4008
NET CLOSING BALANCE		12,707.4008

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	68,741.21	67,079.33
TOTAL MONEY MARKET		67,079.33

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	6.00CR	483.70CR
GSP DIVIDENDS CREDITED	177.11CR	1,090.93CR
AVERAGE YIELD ON MONEY MARKET	5/16/92 TO 6/15/92	3.14%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 03	1	PURCHASE	100	QUALCOMM INC	19.2500	1,986.60	
6 08	1	STOCK DIV	100	RAUCH INDS INC			
6 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,986.60
6 16	1	DIVIDEND	177.11	REINVESTED DIVIDEND GSP AS OF 6/15/92			
6 24	1	DEPOSIT		FUNDS RECD			141.61
6 26	1	DIVIDEND		RAUCH INDS INC QUANTITY 300			6.00
6 26	1	PURCHASE	100	CLOROX COMPANY	43.6250	4,463.22	
6 26	1	PURCHASE	100	PROCTER & GAMBLE CO	46.3750	4,741.02	
6 26	1	PURCHASE	200	TYSON FOODS INC CL A	17.0000	3,503.16	
6 30	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	147.61	

---CONTINUED ON NEXT PAGE---

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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110 1/2 MAIN ST
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25801-4611

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	41.7500	4,175.00
1	100		CLOROX COMPANY	45.3750	4,537.50
1	500		PICCADILLY CAFETERIAS	10.3750	5,187.50
1	100		PROCTER & GAMBLE CO	46.0000	4,600.00
1	100		QUALCOMM INC	19.5000	1,950.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SBARRO INC	23.7500	7,125.00
1	300		SERAGEN INC	8.5000	2,550.00
1	200		TYSON FOODS INC CL A	17.1250	3,425.00
1	300		U S BIOSCIENCE	10.3750	3,112.50
			FIXED INCOME SECURITIES		
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.5830	2,606.64
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.0920	5,982.20
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.9740	8,976.60
			VALUE OF PRICED SECURITIES		57,302.94

OUR CONSOLIDATED STATEMENT OF FINANCIAL CONDITION
FOR THE FISCAL YEAR ENDED MARCH 31, 1992 IS ENCLOSED
IN LIEU OF THE INVESTOR'S SPECTRUM. THE NEXT ISSUE
OF THE INVESTOR'S SPECTRUM WILL BE IN THE JULY
STATEMENTS, WHICH WILL BE MAILED EARLY IN AUGUST.

---END OF STATEMENT---

4-02-002 WWBLR 1

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STATEMENT

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$43,722.62		$68,741.21	$112,463.83

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	5,729.48CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	61,760.04	68,741.21
TOTAL MONEY MARKET		68,741.21

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	323.70CR	477.70CR
GSP DIVIDENDS CREDITED	166.05CR	913.82CR
AVERAGE YIELD ON MONEY MARKET	4/16/92 TO 5/15/92	3.27%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 07	1	DIVIDEND		BRITISH PETC PLC AM SH F QUANTITY 100			102.20
5 08	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,831.68	
5 12	1	PURCHASE	100	SBARRO INC	31.0000	3,181.96	
5 15	1	PURCHASE	100	SBARRO INC	24.8750	2,560.46	
5 18	1	DIVIDEND	166.05	REINVESTED DIVIDEND GSP AS OF 5/15/92			
5 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,181.96
5 20	1	SALE	300-	AMER HEALTH PROPERTIES INC	30.6250		9,013.81
5 20	1	PURCHASE	100	SBARRO INC	24.3750	2,509.45	
5 22	1	DIVIDEND		AMER HEALTH PROPERTIES			205.50

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4-01-002 WWBLR 4

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25801-4611

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STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				INC QUANTITY 300			
5 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,560.46
5 26	1	DIVIDEND		ALBERTSONS INC QUANTITY 100			16.00
5 26	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	205.50	
5 29	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,520.36	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	39.1250	3,912.50
1	500		PICCADILLY CAFETERIAS	11.7500	5,875.00
1	200		RAUCH INDS INC	15.7500	3,150.00
1	300		SBARRO INC	22.6250	6,787.50
1	300		SERAGEN INC	10.2500	3,075.00
1	300		U S BIOSCIENCE	11.5000	3,450.00
			FIXED INCOME SECURITIES		
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.3790	2,590.32
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.0920	5,982.20
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.8890	8,900.10
			VALUE OF PRICED SECURITIES		43,722.62

---CONTINUED ON NEXT PAGE---

4-92-000 WWSLR 477

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD O RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
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25801-4611

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25801-4611

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	3

SUMMERTIME IS ALWAYS A GOOD TIME TO TAKE A LOOK AT YOUR INVESTMENT PORTFOLIO TO BE SURE IT IS ON TARGET WITH YOUR CURRENT INVESTMENT OBJECTIVES. IF YOU WOULD LIKE TO REVIEW YOUR INVESTMENTS, PLEASE CALL YOUR FINANCIAL CONSULTANT FOR AN APPOINTMENT.

---END OF STATEMENT---

4-90-065 WWSLR 47?

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- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL III AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$47,114.17	$5,976.92CR	$49,948.79	$103,039.88

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	12,707.40DB	5,976.92CR
NET CLOSING BALANCE		5,976.92CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	67,079.33	49,948.79
TOTAL MONEY MARKET		49,948.79

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO-DATE
CASH DIVIDENDS CREDITED	60.00CR	543.70CR
GSP DIVIDENDS CREDITED	154.91CR	1,245.84CR
AVERAGE YIELD ON MONEY MARKET	6/16/92 TO 7/15/92	2.98%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 500			60.00
7 06	1	SALE	100-	CLOROX COMPANY	47.2500		4,636.84
7 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		12,647.40
7 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,636.84	
7 15	1	SALE	100-	PROCTER & GAMBLE CO	50.3750		4,944.16
7 16	1	DIVIDEND	154.91	REINVESTED DIVIDEND GSP AS OF 7/15/92			
7 22	1	PURCHASE	100	QUALCOMM INC	15.2500	1,576.52	
7 23	1	PURCHASE	990.099	COLONIAL TR VI U S FD - FOR GROWTH CL B AS OF 7/22/92	10.1000	10,000.00	
7 23	1	PURCHASE	200	ZWEIG FUND INC	12.7500	2,640.53	

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 27	1	SALE	200-	PICCADILLY CAFETERIAS	11.5000		2,231.27
7 27	1	SALE	200-	TYSON FOODS INC CL A	19.2500		3,745.65
7 29	1	TO PLAN ACCT	990.099-	COLONIAL TR VI U S FD - FOR GROWTH CL B			
7 29	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,634.36
7 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,640.53

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.0000	4,300.00
1	300		PICCADILLY CAFETERIAS	11.5000	3,450.00
1	200		QUALCOMM INC	17.7500	3,550.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SBARRO INC	21.3750	6,412.50
1	300		SERAGEN INC	9.0000	2,700.00
1	300		U S BIOSCIENCE	10.0000	3,000.00
1	200		ZWEIG FUND INC	13.0000	2,600.00
			FIXED INCOME SECURITIES		
1	8000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.9890	2,639.12
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.5250	6,133.75
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2820	9,253.80
			VALUE OF PRICED SECURITIES		47,114.17

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
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25801-4611

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	3

IF YOU HAD MUNICIPAL BONDS CALLED RECENTLY,
OR EXPECT TO HAVE MUNICIPAL BONDS CALLED IN THE
FUTURE, WE SUGGEST READING THE ARTICLE ON PAGE 3
OF INVESTOR'S SPECTRUM INCLUDED WITH THIS STATEMENT.
FOR MORE INFORMATION, CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

4-09-003 WWBLR 475

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

801 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
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BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$70,937.98	$2,585.74DB	$34,081.09	$102,433.33

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	5,976.92CR	2,585.74DB
NET CLOSING BALANCE		2,585.74DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	49,948.79	34,081.09
TOTAL MONEY MARKET		34,081.09

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	16.00CR	559.70CR
GSP DIVIDENDS CREDITED	135.99CR	1,381.83CR
AVERAGE YIELD ON MONEY MARKET	7/16/92 TO 8/17/92	2.66%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,976.92	
8 12	1	PURCHASE	100	PROCTER & GAMBLE CO	47.6250	4,866.02	
8 14	1	PURCHASE	200	WASTE MANAGEMENT INC	33.3750	6,827.31	
8 14	1	PURCHASE	100	ZWEIG FUND INC	13.1250	1,361.73	
8 17	1	PURCHASE	100	MC DONALDS CORP	42.6250	4,361.73	
8 18	1	DIVIDEND	135.99	REINVESTED DIVIDEND GSP AS OF 8/17/92			
8 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,866.02
8 21	1	EXCHANGE	6000-	MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82			

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1-01-003 WWBLR

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
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25801-4611

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STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 21	1	EXCHANGE	6000	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 DTD 9/15/82			
8 21	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		8,189.04
8 24	1	PURCHASE	100	GANNETT CO INC DEL	44.8750	4,579.82	
8 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,361.73
8 25	1	DIVIDEND		ALBERTSONS INC QUANTITY 100			16.00
8 28	1	PURCHASE	100	MIRAGE RESORTS INC	25.1250	2,585.74	
8 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,563.82

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		ALBERTSONS INC	43.2500	4,325.00
1	100		GANNETT CO INC DEL	47.0000	4,700.00
1	100		MC DONALDS CORP	42.5000	4,250.00
1	100		MIRAGE RESORTS INC	25.2500	2,525.00
1	300		PICCADILLY CAFETERIAS	12.0000	3,600.00
1	100		PROCTER & GAMBLE CO	46.8750	4,687.50
1	200		QUALCOMM INC	15.3750	3,075.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SBARRO INC	25.2500	7,575.00
1	300		SERAGEN INC	8.2500	2,475.00
1	300		U S BIOSCIENCE	7.6250	2,287.50
1	200		WASTE MANAGEMENT INC	33.1250	6,625.00
1	300		ZWEIG FUND INC	13.0000	3,900.00
			FIXED INCOME SECURITIES		
1	2000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	33.3310	666.62

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1-92-003 WWBLR

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STATEMENT

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8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

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25801-4611

122 MAIN STREET
BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	6000		MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 OTD 9/15/82	33.3310	1,999.86
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 OTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.9000	5,915.00
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY=11.00% EX-CALL CPN 0.000% DUE 1/01/15 OTD 9/28/83	10.2850	9,256.50
			VALUE OF PRICED SECURITIES		70,937.98

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

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304-252-6221

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$54,831.94		$50,508.22	$105,340.16

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	2,585.74DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	34,081.09	50,508.22
TOTAL MONEY MARKET		50,508.22

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	16.00CR	575.70CR
GSP DIVIDENDS CREDITED	75.56CR	1,457.39CR
AVERAGE YIELD ON MONEY MARKET	8/18/92 TO 9/15/92	2.57%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 02	1	SALE	100-	SBARRO INC	27.8750		2,717.81
9 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,585.74
9 10	1	SALE	100-	ALBERTSONS INC	45.3750		4,449.52
9 14	1	SALE	100-	MIRAGE RESORTS INC	27.8750		2,710.08
9 15	1	REDEMPTION	6000-	MISSOURI ST HSG DEV CXXX SUBMITTED PARTIAL CALL PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/92 DTD 9/15/82			
9 15	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,717.81	
9 15	1	REDEMPTION		MISSOURI ST HSG DEV CXXX			1,897.36
9 16	1	DIVIDEND	75.56	REINVESTED DIVIDEND GSP AS OF 9/15/92			

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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BECKLEY WV
25801-4611

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BECKLEY, WEST VIRGINIA 25801
304-252-6221

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 18	1	DIVIDEND		MC DONALDS CORP QUANTITY 100			10.00
9 18	1	SALE	200-	WASTE MANAGEMENT INC	36.5000		7,146.52
9 18	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,346.90	
9 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,720.08	
9 25	1	DIVIDEND		RAUCH INDS INC QUANTITY 300			6.00
9 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,152.52	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		GANNETT CO INC DEL	48.0000	4,800.00
1	100		MC DONALDS CORP	44.3750	4,437.50
1	300		PICCADILLY CAFETERIAS	14.2500	4,275.00
1	100		PROCTER & GAMBLE CO	49.3750	4,937.50
1	200		QUALCOMM INC	18.0000	3,600.00
1	300		RAUCH INDS INC	10.7500	3,225.00
1	200		SBARRO INC	26.6250	5,325.00
1	300		SERAGEN INC	7.0000	2,100.00
1	300		U S BIOSCIENCE	7.2500	2,175.00
1	300		ZWEIG FUND INC	12.7500	3,825.00
			FIXED INCOME SECURITIES		
1	2000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTO 9/15/82	34.2120	684.24
1	35000		OAK RIDGE TENN INDL DEV BRO MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.2600	6,391.00

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4-02-003 WWSLR 16

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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110 1/2 MAIN ST
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25801-4611

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
i	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.0630	9,056.70
			VALUE OF PRICED SECURITIES		54,831.94

IF THE YIELD ON YOUR CDS IS DISAPPOINTING,
WHY NOT CALL YOUR FINANCIAL CONSULTANT FOR A COPY
OF OUR NEW BOOKLET "SIX WAYS TO EARN SIX PERCENT OR
MORE?" IT CARRIES A WEALTH OF INFORMATION FOR
CONSERVATIVE INVESTORS. SEE LEAFLET ENCLOSED.

---END OF STATEMENT---

4-03-003 WWBLR 10

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

- - FOR THE ACCOUNT OF - -
NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV
25801-4611

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$54,285.56	$4,144.81CR	$49,591.58	$108,021.95

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	4,144.81CR
NET CLOSING BALANCE		4,144.81CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	50,508.22	49,591.58
TOTAL MONEY MARKET		49,591.58

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	178.00CR	753.70CR
GSP DIVIDENDS CREDITED	91.40CR	1,548.79CR
AVERAGE YIELD ON MONEY MARKET	9/16/92 TO 10/15/92	2.42%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 100			32.00
10 01	1	DIVIDEND		PICCADILLY CAFETERIAS QUANTITY 300			36.00
10 01	1	DIVIDEND		WASTE MANAGEMENT INC QUANTITY 200			26.00
10 05	1	PURCHASE	100	BRISTOL MYERS SQUIBB CO	61.7500	6,268.17	
10 06	1	SALE	200-	QUALCOMM INC	19.0000		3,690.90
10 06	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	94.00	
10 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,268.17
10 15	1	PURCHASE	500	GABELLI EQUITY TRUST INC	9.5000	4,898.31	
10 15	1	PURCHASE	500	MORGAN GRENFELL SMALL CAP FUND INC	10.7500	5,534.55	
10 16	1	DIVIDEND	91.4	REINVESTED DIVIDEND GSP			

---CONTINUED ON NEXT PAGE---

S-01-003 WWBLR X

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

- - MAIL TO - -
NICK JOE RAHALL II AS CUST FOR
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STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 10/15/92			
10 19	1	SALE	100-	GANNETT CO INC DEL	49.0000		4,810.80
10 19	1	SALE	100-	PROCTER & GAMBLE CO	51.6250		5,073.29
10 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,060.00
10 19	1	DEPOSIT		SHEARSON LEHMAN BROTHERS			5,000.00
10 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,690.90	
10 20	1	CHECK ISSUED		CHECK ISSUED #13221400 MMKT WITHDRAWAL		3,060.00	
10 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,432.86
10 26	1	DIVIDEND		ZWEIG FUND INC QUANTITY 300			84.00
10 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,968.09	
10 28	1	PURCHASE	200	ZWEIG FUND INC	12.2500	2,538.94	
10 30	1	SALE	100-	BRISTOL MYERS SQUIBB CO	67.8750		6,683.75

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GABELLI EQUITY TRUST INC	9.6250	4,812.50
1	100		MC DONALDS CORP	45.8750	4,587.50
1	500		MORGAN GRENFELL SMALL CAP FUND INC	11.3750	5,687.50
1	300		PICCADILLY CAFETERIAS	10.7500	3,225.00
1	300		RAUCH INDS INC	10.1250	3,037.50
1	200		SBARRO INC	25.0000	5,000.00
1	300		SERAGEN INC	10.7500	3,225.00
1	300		U S BIOSCIENCE	7.3750	2,212.50
1	500		ZWEIG FUND INC	12.5000	6,250.00
			FIXED INCOME SECURITIES		
1	2000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.9630	659.26

---CONTINUED ON NEXT PAGE---

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.4420	6,454.70
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.1490	9,134.10
			VALUE OF PRICED SECURITIES		54,285.56

WITH JUST TWO MONTHS REMAINING BEFORE THE END OF THE YEAR, IT'S IMPORTANT TO THINK ABOUT PORTFOLIO AND PERSONAL EXPENSE ADJUSTMENTS TO HELP REDUCE INCOME TAXES. SEE CHUCK AULINO'S ARTICLE ON YEAR-END TAX STRATEGIES IN THE INVESTOR'S SPECTRUM ENCLOSED.

---END OF STATEMENT---

9-03-003 WWBLR 3

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BA08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$41,005.01		$69,901.25	$110,906.26

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,144.81CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	49,591.58	69,901.25
TOTAL MONEY MARKET		69,901.25

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	27.50CR	781.20CR
GSP DIVIDENDS CREDITED	101.19CR	1,649.98CR
AVERAGE YIELD ON MONEY MARKET 10/16/92 TO 11/16/92		2.39%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,538.94
11 06	1	SALE	100-	MC DONALDS CORP	46.1250		4,516.06
11 09	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,683.75	
11 10	1	SALE	200-	SBARRO INC	28.1250		5,504.04
11 12	1	SALE	500-	MORGAN GRENFELL SMALL CAP FUND INC	12.3750		6,016.07
11 16	1	DIVIDEND		PROCTER & GAMBLE CO QUANTITY 100			27.50
11 17	1	DIVIDEND	101.19	REINVESTED DIVIDEND GSP AS OF 11/16/92			
11 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,543.56	
11 19	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,504.04	

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4-01-002 WWBLR

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,016.07	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GABELLI EQUITY TRUST INC	10.2500	5,125.00
1	300		PICCADILLY CAFETERIAS	12.5000	3,750.00
1	300		RAUCH INDS INC	10.2500	3,075.00
1	300		SERAGEN INC	11.5000	3,450.00
1	300		U S BIOSCIENCE	9.6250	2,887.50
1	,500		ZWEIG FUND INC	12.8750	6,437.50
			FIXED INCOME SECURITIES		
1	2000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.8930	657.86
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.3110	6,408.85
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2370	9,213.30
			VALUE OF PRICED SECURITIES		41,005.01

NOW THAT THE NATIONAL ELECTIONS HAVE BEEN DECIDED, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? TO BE SURE, WHY NOT REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT? CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

4-02-002 WWBLR

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801 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

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BK08 6540-0350	233-17-4890	TRADING & SPECULATION	EDWARD G RAHALL 122 MAIN STREET BECKLEY, WEST VIRGINIA 25801 304-252-6221

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STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$39,050.74	$7,635.55DB	$80,581.00	$111,996.19

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	7,635.55DB
NET CLOSING BALANCE		7,635.55DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	69,901.25	80,581.00
TOTAL MONEY MARKET		80,581.00

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	161.00CR	942.20CR
GSP DIVIDENDS CREDITED	228.39CR	1,878.37CR
AVERAGE YIELD ON MONEY MARKET 11/17/92 TO 12/31/92		2.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 01	1	SALE	300-	RAUCH INDS INC	10.7500		3,134.60
12 09	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,134.60	
12 10	1	SALE	300-	PICCADILLY CAFETERIAS	12.5000		3,650.79
12 14	1	SALE	300-	SERAGEN INC	12.0000		3,504.97
12 21	1	DIVIDEND		RAUCH INDS INC QUANTITY 300			6.00
12 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,161.76	
12 28	1	DIVIDEND		GABELLI EQUITY TRUST INC QUANTITY 500			155.00
12 28	1	PURCHASE	100	IMCERA GROUP INC	33.7500	3,461.05	
12 29	1	PURCHASE	150	LUBRIZOL CORP	27.0000	4,174.50	
12 29	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	155.00	
12 31	1	DIVIDEND	228.39	REINVESTED DIVIDEND GSP			

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STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	2

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	500		GABELLI EQUITY TRUST INC	10.2500	5,125.00
1	100		INCERA GROUP INC	33.7500	3,375.00
1	150		LUBRIZOL CORP	27.2500	4,087.50
1	300		U S BIOSCIENCE	11.1250	3,337.50
1	500		ZWEIG FUND INC	13.0000	6,500.00
			FIXED INCOME SECURITIES		
1	2000		MISSOURI ST HSG DEV COMM CAP APPRECIATION BD NO PERIODIC INTRST EX CALL CPN 0.000% DUE 9/15/02 DTD 9/15/82	32.9220	658.44
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.5000	6,475.00
1	90000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.5470	9,492.30
			VALUE OF PRICED SECURITIES		39,050.74

WE APPRECIATE YOUR PATRONAGE THE PAST YEAR AND LOOK FORWARD TO SERVING YOU IN 1993. TO ENSURE THE ACCURACY OF OUR RECORDS AND THOSE REQUIRED BY THE IRS, PLEASE VERIFY THE TAX ID NUMBER ON THIS STATEMENT. IF INCORRECT, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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Tax id number 55-6085192
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-08087-15 240
As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 10.20
Money funds		123,910.36
Stocks		559,551.13
Direct investments		*(see Portfolio details)*
Net value this period		**$ 683,471.69**
Net value last period	$ 704,118 22	

Bulletin board

What's Ahead For 1992? *We believe that a "new economic order" will present unique challenges and opportunities to investors. As 1992 unfolds, will interest rates continue to fall? Will stock prices continue to rise? Ask your Financial Consultant for a copy of our new report, "Investing In The '90s: A New Economic Order 1992."*

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .20	$ .20	$ 0.00
Dividends	886.50	886 50	0.00
Money funds earnings	155.14	94.66	60.48
Total	$ 1,041 84	$ 981.36	$ 60 48

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	$ 256,985.46	*Not applicable*

#3

2962

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 122,878.72
Interest credited	.20		
Dividends credited	886.50		
Money funds earnings credited	94.66		
Money funds earnings reinvested	60.48		
Total	$ 1,041.84	$ 0.00	
Combined closing cash and money funds balance			$ 123,920.56

Cash	10.20
Money funds	123,910.36

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/31/92.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	123,910.36	$ 123,910.36	3.068%	Accrued dividends of $ 194.14
Total value of money funds		$ 123,910.36		

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	$ 38.625	3.106%	$ 1,200.00	$ 38,625.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	79.875	3.455	1,104.00	31,950.00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	300	123.50	.194	72.00	37,050.00	Symbol: DDS\Rated: A+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	28.375	2.819	40.00	1,418.75	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	26	74.50			1,937.00	Symbol: LINB\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	31.375			407.88	Symbol: MCAWA
MCDONALDS CORP	NYSE	700	43.50	.85	259.00	30,450.00	Symbol: MCD\Rated: A+
MERCK & CO INC	NYSE	300	157.125	1.603	756.00	47,137.50	Symbol: MRK\Rated: A+

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ocks
ntinued

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PEPSICO INC-NORTH CAROLINA	NYSE	800	$ 33.75	1.422%	$ 384.00	$ 27,000.00	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	73.00	2.027	1,036.00	51,100.00	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	76.375	2.749	1,050.00	38,187.50	Symbol: MO\Rated: A+
*** SCHLUMBERGER LTD	NYSE	500	59.50	2.016	600.00	29,750.00	Symbol: SLB\Rated: A-
SYSCO CORP	NYSE	800	42.00	.952	320.00	33,600.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	37.125	.969	288.00	29,700.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	53.875	.315	408.00	129,300.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	45.625	.964	308.00	31,937.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,828.00	$ 559,651.13	

irect
ivestments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

nterest
credited

Date	Description	Taxable	Non-taxable	Comment	Amount
01/21/92	INTEREST ON CREDIT BALANCE AT 3.860% 12/31 THRU 1/20	$ .20			$ .20
Total interest earned		$ .20	$ 0.00		$ .20

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Account number 685-08087-15 240

vidends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/02/92	MERCK & CO INC CASH DIV ON 300 SHS RECORD 12/06/91 PAY 01/02/92	$ 189.00			$ 189.00
01/02/92	PEPSICO INC-NORTH CAROLINA CASH DIV ON 800 SHS RECORD 12/13/91 PAY 01/01/92	96.00			96.00
01/02/92	WASTE MANAGEMENT INC CASH DIV ON 700 SHS RECORD 12/23/91 PAY 01/02/92	77.00			77.00
01/03/92	WAL-MART STORES INC NEW CASH DIV ON 2400 SHS RECORD 12/11/91 PAY 01/03/92	102.00			102.00
01/10/92	PHILIP MORRIS COS INC CASH DIV ON 500 SHS RECORD 12/16/91 PAY 01/10/92	262.50			262.50
01/10/92	*** SCHLUMBERGER LTD CASH DIV ON 500 SHS RECORD 12/23/91 PAY 01/10/92	150.00			150.00
01/31/92	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 50 SHS RECORD 01/09/92 PAY 01/31/92	10.00			10.00
Total dividends earned		$ 886.50	$ 0.00		$ 886.50

Money unds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/08/92	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND CASH DIV	$ 94.66		Credited to account	$ 94.66
01/10/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND FOR PERIOD 1/1/92 - 1/12/92. 12 DAYS AVERAGE YIELD 3.43%.		60.48	Reinvested	60.48
Total money funds earnings credited to account					$ 94.66
Total money funds earnings reinvested					$ 60.48
Total earnings from money funds		$ 94.66	$ 60.48		$ 155.14

Money funds details

All transactions are traded at $1.00 per share.

oney funds
:tivity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 122,878.56
01/03/92	Autoinvest	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND	362.16	362.16
01/06/92	Redemption	AMERICAN EXPRESS® GOVERNMENT AND AGENCIES FUND EXCHANGE REDEMPTION	123,240.72	-123,240.72
01/06/92	Investment	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	123,335.38	123,335.38
01/06/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	102.00	102.00
01/13/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	412.50	412.50
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	60.48	60.48
	Closing money funds balance			$ 123,910.36

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

nrealized
ain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 38.625	$ 26,217.20	$ 38,625.00	$ 12,407.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	79.875	8,189.48	31,950.00	23,760.52 #
DILLARD DEPT STORES INC CL A	01/30/91	300	88.019	123.50	26,622.12	37,050.00	10,427.88
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22.62	28.375	1,131.25	1,418.75	287.50 #
LIN BROADCASTING CORP	02/03/87	26	32.43	74.50	843.38	1,937.00	1,093.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	31.375	843.00	407.88	(435.12) #
MCDONALDS CORP	11/27/90	700	28.714	43.50	20,366.47	30,450.00	10,083.53
MERCK & CO INC	12/23/88	300	39.66	157.125	11,968.62	47,137.50	35,168.88 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	33.75	25,730.60	27,000.00	1,269.40
PFIZER INC	06/18/91	700	58.437	73.00	41,313.66	51,100.00	9,786.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	76.375	24,798.83	38,187.50	13,388.67
*** SCHLUMBERGER LTD	12/03/91	500	63.363	59.50	32,034.99	29,750.00	(2,284.99)
SYSCO CORP	02/01/91	800	34.535	42.00	27,967.36	33,600.00	5,632.64
TYCO LABORATORIES INC	06/18/87	800	22.31	37.125	18,078.56	29,700.00	11,621.44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	53.875	12,419.64	129,300.00	116,880.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	45.625	24,020.53	31,937.50	7,916.97
Total value					$ 302,565.87	$ 559,551.13	$ 256,985.46

#Based on information supplied by your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

February 1, 1992 - February 29, 1992

Tax Id number 55-6085192

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-08087-15 240

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/92 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 80.07
Money funds		124,621.72
Stocks		566,551.25
Direct Investments		*(see Portfolio details)*
Net value this period		**$ 691,253.04**
Net value last period	**$ 683,471.68**	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .07	$ .27	$ 0.00
Dividends	446.00	1,332.50	0.00
Money funds earnings	335.16	94.66	395.64
Total	$ 781.23	$ 1,427.43	$ 395.64

Gain/loss summary

	This period	This year
Unrealized gain or (loss)	$ 263,985.58	*Not applicable*

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Account number 885-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 123,920 56
Interest credited	.07		
Dividends credited	446.00		
Money funds earnings reinvested	335 16		
Total	$ 781.23	$ 0 00	
Combined closing cash and money funds balance			$ 124,701 79

Cash	80 07
Money funds	124,621 72

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/28/92.

Money funds

Description	No of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	124,621.72	$ 124,621.72	2.758%	Accrued dividends of $ 117.39
Total value of money funds		**$ 124,621.72**		

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	$ 43 50	2 988%	$ 1,300 00	$ 43,500 00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	80 75	3 417	1,104 00	32,300 00	Symbol: BMY\Rated: A +
DILLARD DEPT STORES INC CL A	NYSE	300	129 75	.184	72 00	38,925 00	Symbol: DDS\Rated: A +
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	31 375	2 549	40 00	1,568 75	Symbol: GAP\Rated: B +
LIN BROADCASTING CORP	OTC	28	78 50			2,041.00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	33 00			429 00	Symbol: MCAWA
MCDONALDS CORP	NYSE	700	40 50	913	259 00	28,350 00	Symbol: MCD\Rated: A +
MERCK & CO INC	NYSE	300	157 625	1 75	828 00	47,287 50	Symbol: MRK\Rated: A +
PEPSICO INC-NORTH CAROLINA	NYSE	800	32 25	1 488	384 00	25,800 00	Symbol: PEP\Rated: A

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Year-end Client Statement

Account number 685-08087-15 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PFIZER INC	NYSE	700	$ 74.50	1.986%	$ 1,036.00	$ 52,150.00	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	76.75	2.736	1,050.00	38,375.00	Symbol: MO\Rated: A+
*** SCHLUMBERGER LTD	NYSE	500	60.00	2.00	600.00	30,000.00	Symbol: SLB\Rated: A-
SYSCO CORP	NYSE	800	45.00	.888	320.00	36,000.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	37.00	.972	288.00	29,600.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	54.00	.314	408.00	129,600.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	43.75	1.005	308.00	30,625.00	Symbol: WMX\Rated: A
Total value of stocks					**$ 7,997.00**	**$ 666,651.25**	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	**$ 20,000.00**	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
02/21/92	INTEREST ON CREDIT BALANCE AT 3.801% 1/21 THRU 2/20	$ .07			$ .07
Total interest earned		**$ .07**	**$ 0.00**		**$ .07**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-08087-15 240

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/03/92	BRISTOL MYERS SQUIBB CO CASH DIV ON 400 SHS RECORD 01/03/92 PAY 02/01/92	$ 276.00			$ 276.00
02/03/92	DILLARD DEPT STORES INC CL A CASH DIV ON 300 SHS RECORD 12/31/91 PAY 02/01/92	18.00			18.00
02/03/92	TYCO LABORATORIES INC CASH DIV ON 800 SHS RECORD 01/07/92 PAY 02/03/92	72.00			72.00
02/18/92	SYSCO CORP CASH DIV ON 800 SHS RECORD 01/31/92 PAY 02/15/92	80 00			80 00
Total dividends earned		$ 446 00	$ 0 00		$ 446 00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
02/14/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 01/13/92-02/17/92 36 DAYS AVERAGE YIELD 2 74 %.		$ 335 16	$ 335 16
Total earnings from money funds			$ 0.00	$ 335 16	$ 335 16

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 123,810 36
02/04/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	376.20	376 20
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	335.16	335 16
	Closing money funds balance			$ 124,621 72

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 43.50	$ 26,217.20	$ 43,500.00	$ 17,282.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	80.75	8,189.48	32,300.00	24,110.52 #
DILLARD DEPT STORES INC CL A	01/30/91	300	88.019	129.75	26,622.12	38,925.00	12,302.88
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22.62	31.375	1,131.25	1,568.75	437.50 #
LIN BROADCASTING CORP	02/03/87	26	32.43	78.50	843.36	2,041.00	1,197.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	33.00	843.00	429.00	(414.00) #
MCDONALDS CORP	11/27/90	700	28.714	40.50	20,366.47	28,350.00	7,963.53
MERCK & CO INC	12/23/86	300	39.66	157.625	11,968.62	47,287.50	35,318.88 #
PEPSICO INC-NORTH CAROLINA	06/01/91	800	31.75	32.25	25,730.60	25,800.00	69.40
PFIZER INC	06/18/91	700	58.437	74.50	41,313.66	52,150.00	10,836.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	76.75	24,798.83	38,375.00	13,576.17
*** SCHLUMBERGER LTD	12/03/91	500	63.363	60.00	32,034.99	30,000.00	(2,034.99)
SYSCO CORP	02/01/91	800	34.535	45.00	27,967.36	36,000.00	8,032.64
TYCO LABORATORIES INC	06/18/87	800	22.31	37.00	18,078.56	29,600.00	11,521.44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	54.00	12,419.64	129,600.00	117,180.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	43.75	24,020.53	30,625.00	6,604.47
Total value					$ 302,565.67	$ 566,551.25	$ 263,985.58

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

March 1 - March 31, 1992

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance		$ 170 41
Money funds		153,557 61
Accrued Money Fund Dividends		203 91
Stocks		523,695 25
Direct investments		(see Portfolio details)
Net value this period		**$ 677,627.18**
Net value last period	$ 691,253.04	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 9 66	$ 9 93	$ 0 00
Dividends	744 75	2,077 25	0 00
Money funds earnings	251.86	94 66	647 50
Total	$ 1,006 27	$ 2,181 84	$ 647 50

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 7,833 49	$ 7,633.49
Unrealized gain or (loss)	241,516.05	Not applicable

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

March 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 124,701 78
Securities bought and other subtractions		0 00	
Securities sold and other additions	28,019 96		
Interest credited	9 68		
Dividends credited	744 75		
Money funds earnings reinvested	251 86		
Total	$ 29,026 23	$ 0 00	
Combined closing cash and money funds balance			$ 153,728 02

Cash	170 41
Money funds	153 557 61

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	153,557.61	$ 153,557.61	$ 203.91	2.618%	
Total value of money funds		$ 153,557 61	$ 203.91		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	44 00	2 954	1,300 00	44,000.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	76 25	3 619	1,104 00	30,500.00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	300	125 00	.192	72.00	37,500.00	Symbol: DDS\Rated: A+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	32 375	2 471	40 00	1,618 75	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	26	74 50			1,937 00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	29 00			377 00	Symbol: MCAWA
MERCK & CO INC	NYSE	300	147.125	1 875	828 00	44,137 50	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	34 25	1.401	384.00	27,400 00	Symbol: PEP\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PFIZER INC	NYSE	700	69.50	2.129	1,036.00	48,650.00	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	75.75	2.772	1,050.00	37,875.00	Symbol: MO\Rated: A+
*** SCHLUMBERGER LTD	NYSE	500	55.875	2.147	600.00	27,937.50	Symbol: SLB\Rated: A-
SYSCO CORP	NYSE	800	46.625	.857	320.00	37,300.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	37.25	.966	288.00	29,800.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	53.25	.394	504.00	127,800.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	38.375	1.146	308.00	26,862.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,834.00	$ 623,695.25	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
03/06/92	Sold	MCDONALDS CORP AVG PRICE SHOWN-DETAILS ON REQ	-700	$ 40.524	$ 28,019.96
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 28,019.96

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

March 31 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 885-08087-15 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Taxable	Non-taxable	Comment	Amount
03/23/92	INTEREST ON CREDIT BALANCE AT 4.004% 2/21 THRU 3/22	$ 9.66			$ 9.66
Total interest earned		**$ 9.66**	**$ 0.00**		**$ 9.66**

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
03/13/92	BANKAMERICA CORP CASH DIV ON 1000 SHS RECORD 02/25/92 PAY 03/13/92	$ 325.00			$ 325.00
03/19/92	PFIZER INC CASH DIV ON 700 SHS RECORD 02/07/92 PAY 03/19/92	259.00			259.00
03/20/92	MCDONALDS CORP CASH DIV ON 700 SHS RECORD 03/02/92 PAY 03/20/92	64.75			64.75
03/31/92	PEPSICO INC-NORTH CAROLINA CASH DIV ON 800 SHS RECORD 03/13/92 PAY 03/31/92	96.00			96.00
Total dividends earned		**$ 744.75**	**$ 0.00**		**$ 744.75**

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
03/13/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 02/18/92-03/15/92 27 DAYS AVERAGE YIELD 2.60 %.		$ 251.86	$ 251.86
Total earnings from money funds			**$ 0.00**	**$ 251.86**	**$ 251.86**

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EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 124,621 72
03/09/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	28,100.03	28,100.03
03/16/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	325.00	325.00
03/20/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	259.00	259.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	251.88	251.88
	Closing money funds balance			$ 153,857 61

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
MCDONALDS CORP AVG PRICE SHOWN-DETAILS ON REQ	11/27/90	02/28/92 Sold	700	$ 28.714	$ 40.524	$ 20,386.47	$ 28,019.96	$ 7,633.49
Total realized gain or (loss)						$ 20,386.47	$ 28,019.96	$ 7,633.49

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 44.00	$ 26,217.20	$ 44,000.00	$ 17,782 80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	76.25	8,189.48	30,500.00	22,310 52 #
DILLARD DEPT STORES INC CL A	01/30/91	300	88 019	125 00	26,622.12	37,500.00	- 10,877 88
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22.62	32 375	1,131.25	1,618.75	487.50 #
LIN BROADCASTING CORP	02/03/87	26	32.43	74.50	843.36	1,937.00	- 1,093 64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	29.00	843.00	377.00	(466.00) #
MERCK & CO INC	12/23/88	300	39 86	147.125	11,958 62	44,137.50	32,178.88 #
PEPSICO INC-NORTH CAROLINA	06/01/91	800	31.75	34 25	25,730 60	27,400 00	1,669.40

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
PFIZER INC	06/18/91	700	$ 58.437	$ 69.50	$ 41,313.68	$ 48,650.00	$ 7,336.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	75.75	24,798.83	37,875.00	13,076.17
*** SCHLUMBERGER LTD	12/03/91	500	63.363	55.875	32,034.99	27,937.50	(4,097.49)
SYSCO CORP	02/01/91	800	34.535	46.625	27,967.36	37,300.00	9,332.64
TYCO LABORATORIES INC	06/18/87	800	22.31	37.25	18,078.56	29,800.00	11,721.44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	53.25	12,419.64	127,800.00	115,380.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	38.375	24,020.53	26,862.50	2,841.97
Total value					$ 282,179.20	$ 523,695.25	$ 241,616.05

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

APR 30, 1992

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Money funds	$ 183,834 65
Accrued money fund dividends	254 32
Stocks	497,363 63
Direct Investments	*(see Portfolio details)*
Net value this period	$ 681,452 60
Net value last period	$ 677,627.18

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 26	$ 10 19	$ 0 00
Dividends	822 50	2,899 75	0 00
Money funds earnings	356 13	94 66	1,003 63
Total	$ 1,178 89	$ 3,004 60	$ 1,003 63

Gain/loss summary

	This period	This year
Realized gain or (loss)	($ 3,107.25)	$ 4,526.24
Unrealized gain or (loss)	247,219.42	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

April 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 153,728 02
Securities bought and other subtractions		0.00	
Securities sold and other additions	28,927.74		
Interest credited	.26		
Dividends credited	822 50		
Money funds earnings reinvested	356 13		
Total	$ 30,106 63	$ 0 00	
Combined closing cash and money funds balance			$ 183,834 65

Money funds 183,834 65

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	183,834.65	$ 183,834.65	$ 254.32	3.124%	
Total value of money funds		$ 183,834 65	$ 254.32		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	45 125	2 88	1,300 00	45,125.00	Symbol. BAC\Rated. B-
BRISTOL MYERS SQUIBB CO	NYSE	400	74 375	3 71	1,104 00	29,750 00	Symbol. BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	300	119 25	201	72 00	35,775.00	Symbol: DDS\Rated: A+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	32 00	2 50	40 00	1,600 00	Symbol. GAP\Rated. B+
LIN BROADCASTING CORP	OTC	28	73 00			1,898 00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	28 125			365.63	Symbol: MCAWA
MERCK & CO INC	NYSE	300	145 00	1 903	828 00	43,500 00	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	36 50	1.315	384 00	29,200 00	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	71.50	2 069	1,036.00	50,050 00	Symbol: PFE\Rated: A+

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks *continued*

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PHILIP MORRIS COS INC	NYSE	500	77.875	2.696	1,050.00	38,937.50	Symbol: MO\Rated: A+
SYSCO CORP	NYSE	800	48.875	.818	320.00	39,100.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	36.375	.989	288.00	29,100.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	52.25	.401	504.00	125,400.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	39.375	1.117	308.00	27,562.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,234.00	$ 497,363.63	

Direct Investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
04/23/92	Sold	*** SCHLUMBERGER LTD AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 58.53817000	-500	$ 58.538	$ 28,927.74
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 28,927.74

Interest credited

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Date	Description	Comment	Taxable	Non-taxable	Amount
04/21/92	INTEREST ON CREDIT BALANCE	AT 3.918% 3/23 THRU 4/20	$ .26		$ .26
Total interest earned			$ .26	$ 0.00	$ .26

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

April 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
04/01/92	MERCK & CO INC	CASH DIV ON 300 SHS RECORD 03/06/92 PAY 04/01/92	$ 207.00		$ 207.00
04/02/92	WAL-MART STORES INC NEW	CASH DIV ON 2400 SHS RECORD 03/23/92 PAY 04/02/92	126.00		126.00
04/02/92	WASTE MANAGEMENT INC	CASH DIV ON 700 SHS RECORD 03/18/92 PAY 04/02/92	77.00		77.00
04/03/92	*** SCHLUMBERGER LTD	CASH DIV ON 500 SHS RECORD 03/02/92 PAY 04/03/92	150.00		150.00
04/10/92	PHILIP MORRIS COS INC	CASH DIV ON 500 SHS RECORD 03/12/92 PAY 04/10/92	262.50		262.50
Total dividends earned			$ 822.50	$ 0.00	$ 822.50

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
04/10/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 03/16/92-04/12/92 28 DAYS AVERAGE YIELD 3.02 %.		$ 356.13	$ 356.13
Total earnings from money funds			$ 0.00	$ 356.13	$ 356.13

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 153,657.61
04/01/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	170.41	170.41
04/02/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	207.00	207.00
04/03/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	203.00	203.00
04/06/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	150.00	150.00
04/13/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	262.50	262.50
04/24/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	26,926.00	26,926.00
04/24/92	Investment	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	26,926.00	26,926.00

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
04/24/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	28,928.00	$ -28,928.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	358.13	358.13
		Closing money funds balance		$ 183,834 65

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
*** SCHLUMBERGER LTD AVG PRICE SHOWN-DETAILS ON REQ FULL PRICE IS 58.53817000	12/03/91	04/15/92 Sold	500	$ 63.363	$ 58.538	$ 32,034 99	$ 28,927.74	($ 3,107 25)
Total realized gain or (loss)						$ 32,034.99	$ 28,927.74	($ 3,107.25)

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 45.125	$ 26,217.20	$ 45,125.00	$ 18,907.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	74.375	8,189.48	29,750.00	21,560 52 #
DILLARD DEPT STORES INC CL A	01/30/91	300	88.019	118.25	26,622.12	35,775 00	9,152 88
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22 62	32 00	1,131.25	1,600.00	468 75 #
LIN BROADCASTING CORP	02/03/87	26	32 43	73.00	843.38	1,898.00	1,054 64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	28.125	843.00	365.63	(477.37) #
MERCK & CO INC	12/23/88	300	39 66	145 00	11,968 62	43,500.00	31,531 38 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31 75	36.50	25,730 60	29,200 00	3,469 40
PFIZER INC	06/18/91	700	58 437	71 50	41,313 66	50,050 00	8,736 34
PHILIP MORRIS COS INC	11/14/90	500	49 00	77 875	24,798 83	38,937.50	14,138 67
SYSCO CORP	02/01/91	800	34 535	48 875	27,967 36	39,100 00	11,132 64
TYCO LABORATORIES INC	06/18/87	800	22 31	36 375	18,078 56	29,100 00	11,021 44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5 10	52 25	12,419 64	125,400.00	112,980.36 #

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Reference Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
WASTE MANAGEMENT INC	11/14/90	700	$ 33.875	$ 39.375	$ 24,020.53	$ 27,562.50	$ 3,541.97
Total value					$ 250,144.21	$ 497,363.63	$ 247,219.42

#Based on information supplied by your Financial Consultant.

LEHMAN BROTHERS

Preferred Client Statement

May 1 - May 31, 1992

Page 1 of 2

Ref: 0001 3802 0007 1974

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Cash balance	$ 3.17
Money funds	184,714.08
Accrued money fund dividends	329.43
Stocks	501,746.25
Direct investments	*(see Portfolio details)*
Net value this period	**$ 686,792.93**
Net value last period	$ 681,452.60

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 3.17	$ 13.36	$ 0.00
Dividends	456.00	3,355.75	0.00
Money funds earnings	423.43	94.66	1,427.06
Total	$ 882.60	$ 3,463.77	$ 1,427.06

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 4,526.24
Unrealized gain or (loss)	251,602.04	*Not applicable*

SHEARSON LEHMAN BROTHERS

THE HIGH FIELDS BROTHERS INC

Preferred Client Statement

May 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 183,834 65
Interest credited	3.17		
Dividends credited	456.00		
Money funds earnings reinvested	423.43		
Total	$ 882 60	$ 0.00	
Combined closing cash and money funds balance			$ 184,717 25

Cash	3 17
Money funds	184,714 08

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/29/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	184,714.08	$ 184,714.08	$ 329.43	3.214%	
Total value of money funds		$ 184,714.08	$ 329.43		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	45.75	2.841	1,300.00	45,750.00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	72.375	3.613	1,104.00	28,950.00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	300	124.625	.192	72.00	37,387.50	Symbol: DDS\Rated: A+
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	32.25	2.48	40.00	1,612.50	Symbol: GAP\Rated: B+
LIN BROADCASTING CORP	OTC	26	67.00			1,742.00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	27.25			354.25	Symbol: MCAWA
MERCK & CO INC	NYSE	300	151.125	.608	276.00	45,337.50	Stock split pending Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	36.50	1.424	416.00	29,200.00	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	74.625	1.983	1,036.00	52,237.50	Symbol: PFE\Rated: A+

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EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PHILIP MORRIS COS INC	NYSE	500	77.50	2.709	1,050.00	38,750.00	Symbol: MO\Rated: A+
SYSCO CORP	NYSE	800	50.25	.477	192.00	40,200.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	35.00	1.028	288.00	28,000.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	53.00	.398	504.00	127,200.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	35.75	1.23	308.00	25,025.00	Symbol: WMX\Rated: A
Total value of stocks					$ 6,586.00	$ 501,746.25	

Direct Investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
05/21/92	INTEREST ON CREDIT BALANCE	AT 3.666% 4/21 THRU 5/20	$ 3.17		$ 3.17
Total interest earned			$ 3.17	$ 0.00	$ 3.17

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
05/01/92	BRISTOL MYERS SQUIBB CO	CASH DIV ON 400 SHS RECORD 04/03/92 PAY 05/01/92	$ 276.00		$ 276.00
05/01/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 300 SHS RECORD 03/31/92 PAY 05/01/92	18.00		18.00
05/01/92	GREAT ATLANTIC&PAC TEA CO INC	CASH DIV ON 50 SHS RECORD 04/13/92 PAY 05/01/92	10.00		10.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 885-08087-15 240

Dividends *continued*

Date	Description	Comment	Taxable	Non-taxable	Amount
05/04/92	TYCO LABORATORIES INC	CASH DIV ON 800 SHS RECORD 04/07/92 PAY 05/04/92	$ 72.00		$ 72.00
05/15/92	SYSCO CORP	CASH DIV ON 800 SHS RECORD 04/24/92 PAY 05/15/92	80.00		80.00
Total dividends earned			$ 456.00	$ 0.00	$ 456.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
05/08/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 04/13/92-05/10/92 28 DAYS AVERAGE YIELD 3.25 %.		$ 423.43	$ 423.43
Total earnings from money funds			$ 0.00	$ 423.43	$ 423.43

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 183,834.65
05/04/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	304.00	304.00
05/18/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	152.00	152.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	423.43	423.43
	Closing money funds balance			$ 184,714.08

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 45.75	$ 26,217.20	$ 45,750.00	$ 19,532.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	72 375	8,189.48	28,950.00	20,760.52 #
DILLARD DEPT STORES INC CL A	01/30/91	300	88 019	124.625	26,622.12	37,387.50	10,765.38
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22 62	32.25	1,131.25	1,612.50	481.25 #
LIN BROADCASTING CORP	02/03/87	26	32 43	67.00	843.38	1,742.00	898.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	27.25	843.00	354.25	(488.75) #
MERCK & CO INC	12/23/86	300	39 66	151.125	11,968.62	45,337 50	33,368.88 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	36.50	25,730.60	29,200.00	3,469.40
PFIZER INC	06/18/91	700	58.437	74.625	41,313.68	52,237.50	10,923 84
PHILIP MORRIS COS INC	11/14/90	500	49.00	77.50	24,798.83	38,750.00	13,951.17
SYSCO CORP	02/01/91	800	34.535	50.25	27,967.36	40,200.00	12,232.64
TYCO LABORATORIES INC	06/18/87	800	22.31	35.00	18,078.56	28,000.00	9,921.44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	53.00	12,419.64	127,200.00	114,780.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	35.75	24,020.53	25,025.00	1,004 47
Total value [illegible]					$ 250,144.21	$ 501,746.25	$ 251,602.04

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement
June 30, 1992

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Cash balance	$ 104.13
Money funds	185,817.79
Accrued money fund dividends	197.18
Stocks	486,209.13
Direct investments	*(see Portfolio details)*
Net value this period	**$ 672,328.23**
Net value last period	**$ 686,792.93**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .13	$ 13.49	$ 0.00
Dividends	688.00	4,043.75	0.00
Money funds earnings	516.54	94.66	1,943.60
Total	**$ 1,204.67**	**$ 4,151.90**	**$ 1,943.60**

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 4,526.24
Unrealized gain or (loss)	236,064.92	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

June 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 184,717.26
Securities bought and other subtractions		0.00	
Securities sold and other additions	0 00		
Interest credited	.13		
Dividends credited	688 00		
Money funds earnings reinvested	516 54		
Total	$ 1,204 67	$ 0.00	
Combined closing cash and money funds balance			$ 185,921 92

Cash	104 13
Money funds	185,817.79

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	185,817.79	$ 185,817.79	$ 197.18	2.531%	
Total value of money funds		$ 185,817.79	$ 197.18		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	44 375	2 929	1,300 00	44,375 00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	65 875	4 189	1,104 00	26,350 00	Symbol: BMY\Rated: A +
DILLARD DEPT STORES INC CL A	NYSE	900	36 875	216	72 00	33,187.50	Symbol: DDS\Rated: A +
GREAT ATLANTIC&PAC TEA CO INC	NYSE	50	27 00	2.962	40 00	1,350 00	Symbol: GAP\Rated: B +
LIN BROADCASTING CORP	OTC	26	64 00			1,664 00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	24.625			320.13	Symbol: MCAWA
MERCK & CO INC	NYSE	900	48 75	1 887	828 00	43,875 00	Symbol: MRK\Rated: A +
PEPSICO INC-NORTH CAROLINA	NYSE	800	34 875	1 491	416.00	27,900.00	Symbol: PEP\Rated: A

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN HUTTON INC.

Preferred Client Statement

June 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
PFIZER INC	NYSE	700	73.00	2.027	1,036.00	51,100.00	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	73.50	2.857	1,050.00	36,750.00	Symbol: MO\Rated: A+
SYSCO CORP	NYSE	1,600	24.75	.969	384.00	39,600.00	Symbol: SYY\Rated: A+
TYCO LABORATORIES INC	NYSE	800	34.00	1.058	288.00	27,200.00	Symbol: TYC\Rated: A-
WAL-MART STORES INC NEW	NYSE	2,400	53.75	.39	504.00	129,000.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	33.625	1.546	364.00	23,537.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,386.00	$ 486,209.13	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
06/02/92	Stk split	MERCK & CO INC STK SPLIT ON 0000300 SHS	600		$ 0.00
06/15/92	Stk split	DILLARD DEPT STORES INC CL A STK SPLIT ON 0000300 SHS	600		0.00
06/29/92	Stk split	SYSCO CORP STK SPLIT ON 0000800 SHS	800		0.00
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 0.00

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
06/22/92	INTEREST ON CREDIT BALANCE	AT 3.700% 5/21 THRU 6/21	$ .13		$ .13
Total interest earned			$ .13	$ 0.00	$ .13

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/12/92	BANKAMERICA CORP	CASH DIV ON 1000 SHS RECORD 05/22/92 PAY 06/12/92	$ 325.00		$ 325.00
06/18/92	PFIZER INC	CASH DIV ON 700 SHS RECORD 05/15/92 PAY 06/18/92	259.00		259.00
06/30/92	PEPSICO INC-NORTH CAROLINA	CASH DIV ON 800 SHS RECORD 06/12/92 PAY 06/30/92	104.00		104.00
Total dividends earned			$ 688.00	$ 0.00	$ 688.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
06/12/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 05/11/92-06/14/92 35 DAYS AVERAGE YIELD 2.92 %.		$ 516.54	$ 516.54
Total earnings from money funds			$ 0.00	$ 516.54	$ 516.54

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 184,714.08
06/15/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	328.17	328.17
06/18/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	259.00	259.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	516.54	516.54
	Closing money funds balance			$ 185,817.79

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

June 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 44.375	$ 26,217.20	$ 44,375.00	$ 18,157.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	65.875	8,189.48	26,350.00	18,160.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29.339	36.875	26,622.12	33,187.50	6,565.38
GREAT ATLANTIC&PAC TEA CO INC	12/31/86	50	22.62	27.00	1,131.25	1,350.00	218.75 #
LIN BROADCASTING CORP	02/03/87	26	32.43	64.00	843.36	1,664.00	820.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	24.625	843.00	320.13	(522.87) #
MERCK & CO INC	12/23/86	800	13.22	48.75	11,968.62	43,875.00	31,906.38 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	34.875	25,730.60	27,900.00	2,169.40
PFIZER INC	06/18/91	700	58.437	73.00	41,313.66	51,100.00	9,786.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	73.50	24,798.83	36,750.00	11,951.17
SYSCO CORP	02/01/91	1,600	17.267	24.75	27,967.36	39,600.00	11,632.64
TYCO LABORATORIES INC	06/18/87	800	22.31	34.00	18,078.56	27,200.00	9,121.44 #
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	53.75	12,419.64	129,000.00	116,580.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	33.625	24,020.53	23,537.50	(483.03)
Total value					$ 250,144.21	$ 486,209.13	$ 236,064.92

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

Period Ending Dec. 31 1992

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Money funds	$ 213 603.40
Accrued money fund dividends	256.15
Stocks	480,703.63
Direct investments	*(see Portfolio details)*
Net value this period	**$ 694,563.18**
Net value last period	**$ 672,328.23**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ .16	$ 13.65	$ 0.00
Dividends	686.50	4,730.25	0.00
Money funds earnings	328.59	94.66	2 272.19
Total	$ 1,015.25	$ 4,838.56	$ 2 272.19

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 7,456.42	$ 11 982.66
Unrealized gain or (loss)	249,769.23	*Not applicable*

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SHEARSON LEHMAN BROTHERS

Preferred Client Statement
July 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 185 921 92
Securities bought and other subtractions		0 00	
Securities sold and other additions	26 666 23		
Interest credited	16		
Dividends credited	686 50		
Money funds earnings reinvested	328 59		
Total	$ 27,681 48	$ 0 00	
Combined closing cash and money funds balance			$ 213 603 40

Money funds 213,603 40

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	213,603 40	$ 213,603.40	$ 256.15	2 192%	
Total value of money funds		**$ 213,603.40**	**$ 256.15**		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	$ 45 25	2 872%	$ 1,300 00	$ 45,250 00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	69 50	3 971	1,104 00	27,800 00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	900	37 625	212	72 00	33 862 50	Symbol: DDS\Rated: A+
LIN BROADCASTING CORP	OTC	26	69 50			1,807 00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	27 625			359 13	Symbol: MCAWA
MERCK & CO INC	NYSE	900	51 875	1 927	900 00	46 687 50	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	37 375	1 391	416 00	29 900 00	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	78 375	1 888	1,036 00	54 862 50	Symbol: PFE\Rated: A+
	NYSE	500	79 875	2 629	1,050 00	39,937 50	Symbol: MO\Rated: A+

SHEARSON LEHMAN BROTHERS

Preferred Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
SYSCO CORP	NYSE	1,600	$ 25.75	.932%	$ 384.00	$ 41,200.00	Symbol: SYY\Rated: A +
WAL-MART STORES INC NEW	NYSE	2,400	55 875	.375	504 00	134,100 00	Symbol: WMT\Rated: A +
WASTE MANAGEMENT INC	NYSE	700	35 625	1.459	364 00	24,937.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,130.00	$ 480,703.83	

Direct Investments

We provide the following information about direct investments as an aid to your financial record keeping It reflects purchases through Shearson Lehman Brothers or information supplied to us Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/86
Total direct investments	$ 20,000 00	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/21/92	Sold	GREAT ATLANTIC&PAC TEA CO INC NO DIFFERENTIAL	-50	$ 27.00	$ 1,299 95
07/21/92	Sold	TYCO LABORATORIES INC	-800	32.125	25 366 28
Total securities bought and other subtractions					$ 0 00
Total securities sold and other additions					$ 26,666 23

Earnings details

The tax status of earnings is reliable to the best of our knowledge Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
07/21/92	INTEREST ON CREDIT BALANCE	AT 3 420% 6/22 THRU 7/20	$ 16		$ 16
Total interest earned			$ 16	$ 0 00	$ 16

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

July 1 - July 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
07/01/92	MERCK & CO INC	CASH DIV ON 900 SHS RECORD 06/08/92 PAY 07/01/92	$ 207.00		$ 207.00
07/02/92	WASTE MANAGEMENT INC	CASH DIV ON 700 SHS RECORD 06/17/92 PAY 07/02/92	91.00		91.00
07/06/92	WAL-MART STORES INC NEW	CASH DIV ON 2400 SHS RECORD 06/15/92 PAY 07/03/92	126.00		126.00
07/10/92	PHILIP MORRIS COS INC	CASH DIV ON 500 SHS RECORD 06/15/92 PAY 07/10/92	262.50		262.50
Total dividends earned			$ 686.50	$ 0.00	$ 686.50

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
07/10/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 06/13/92-07/12/92 28 DAYS AVERAGE YIELD 2.30 %		$ 328.59	$ 328.59
Total earnings from money funds			$ 0.00	$ 328.59	$ 328.59

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 185,817.79
07/01/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	104.13	104.13
07/02/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	207.00	207.00
07/07/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	217.00	217.00
07/13/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	262.50	262.50
07/22/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	26,666.39	26,666.39
07/22/92	Investment	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	26,666.39	26,666.39

SHEARSON LEHMAN BROTHERS

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds activity
continued

Date	Activity	Description	Quantity	Amount
07/22/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	26,666.39	$ -26,666.39
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	326.59	326.59
	Closing money funds balance			$ 213,603.40

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
GREAT ATLANTIC&PAC TEA CO INC NO DIFFERENTIAL	12/31/86	07/14/92 Sold	50	$ 22.62	$ 27.00	$ 1,131.25	$ 1,299.95	$ 168.70 #
TYCO LABORATORIES INC	06/18/87	07/14/92 Sold	800	22.31	32.125	18,076.56	25,366.28	7,267.72 #
Total realized gain or (loss)						$ 19,208.81	$ 26,666.23	$ 7,458.42

#Based on information supplied by your Financial Consultant.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 45.25	$ 26,217.20	$ 45,250.00	$ 19,032.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	69.50	8,189.48	27,800.00	19,610.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29.339	37.625	26,622.12	33,862.50	7,240.38
LIN BROADCASTING CORP	02/03/87	26	32.43	69.50	843.36	1,807.00	963.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	27.625	843.00	359.13	(483.87) #
MERCK & CO INC	12/23/86	900	13.22	51.875	11,968.62	46,687.50	34,718.88 #
PEPSICO INC NORTH CAROLINA	08/01/91	800	31.75	37.375	25,730.60	29,900.00	4,169.40
PFIZER INC	06/18/91	700	58.437	78.375	41,313.68	54,862.50	13,548.84
PHILIP MORRIS COS INC	11/14/90	500	49.00	79.875	24,798.83	39,937.50	15,138.67
SYSCO CORP	02/01/91	1,600	17.267	25.75	27,967.36	41,200.00	13,232.64
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	55.875	12,419.64	134,100.00	121,680.36 #

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
WASTE MANAGEMENT INC	11/14/90	700	$ 33.875	$ 35.625	$ 24,020.53	$ 24,937.50	$ 916.97
Total value					**$ 230,934.40**	**$ 480,703.63**	**$ 249,769.23**

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

August 31, 1992

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Cash balance	$ 98 43
Money funds	214,406 10
Accrued money fund dividends	204 75
Stocks	472,102 88
Direct investments	*(see Portfolio details)*
Net value this period	**$ 686,812.16**
Net value last period	$ 694,563.18

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 2 43	$ 16 08	$ 0 00
Dividends	462 00	5,192 25	0 00
Money funds earnings	436.70	94 66	2,708 89
Total	**$ 901.13**	**$ 5,302 99**	**$ 2,708 89**

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 11,982 66
Unrealized gain or (loss)	241,168 48	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

August 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 213,603 40
Interest credited	2 43		
Dividends credited	462.00		
Money funds earnings reinvested	436 70		
Total	$ 901 13	$ 0 00	
Combined closing cash and money funds balance			$ 214,504 53

Cash	98 43
Money funds	214,406.10

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	214,406.10	$ 214,406.10	$ 204.75	2.269%	
Total value of money funds		$ 214,406.10	$ 204.75		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
BANKAMERICA CORP	NYSE	1,000	$ 42 875	3 032%	$ 1,300 00	$ 42,875 00	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	66 625	4 142	1,104 00	26,650 00	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	900	34 875	229	72 00	31,387 50	Symbol: DDS\Rated: A+
LIN BROADCASTING CORP	OTC	26	67 00			1,742 00	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	24 875			323 38	Symbol: MCAWA
MERCK & CO INC	NYSE	900	48 625	2 056	900 00	43,762 50	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	37 50	1 386	416 00	30,000 00	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	77 25	1 915	1,036 00	54,075 00	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	82 00	3 17	1,300 00	41,000 00	Symbol: MO\Rated: A+
SYSCO CORP	NYSE	1,600	25 00	96	384.00	40,000.00	Symbol: SYY\Rated: A+

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Statement

August 1 - August 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
WAL-MART STORES INC NEW	NYSE	2,400	$ 57.125	.367%	$ 504.00	$ 137,100.00	Symbol: WMT\Rated: A+
WASTE MANAGEMENT INC	NYSE	700	33.125	1.569	364.00	23,187.50	Symbol: WMX\Rated: A
Total value of stocks					$ 7,380.00	$ 472,102.88	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping It reflects purchases through Shearson Lehman Brothers or information supplied to us Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/88
Total direct investments	$ 20,000 00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
08/21/92	INTEREST ON CREDIT BALANCE	AT 3.159% 7/21 THRU 8/20	$ 2 43		$ 2 43
Total interest earned			$ 2 43	$ 0 00	$ 2 43

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
08/03/92	BRISTOL MYERS SQUIBB CO	CASH DIV ON 400 SHS RECORD 07/03/92 PAY 08/01/92	$ 276 00		$ 276 00
08/03/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 900 SHS RECORD 06/30/92 PAY 08/03/92	18 00		18.00
08/03/92	TYCO LABORATORIES INC	CASH DIV ON 800 SHS RECORD 07/07/92 PAY 08/03/92	72 00		72.00
08/14/92	SYSCO CORP	CASH DIV ON 1600 SHS RECORD 07/31/92 PAY 08/14/92	96 00		96 00
Total dividends earned			$ 462 00	$ 0 00	$ 462 00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
08/14/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 07/13/92-08/16/92 35 DAYS AVERAGE YIELD 2.21 %.		$ 436.70	$ 436.70
Total earnings from money funds			$ 0.00	$ 436.70	$ 436.70

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 213,603.40
08/04/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	366.00	366.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	436.70	436.70
	Closing money funds balance			$ 214,406.10

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preliminary Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 42.875	$ 26,217.20	$ 42,875 00	$ 16,657.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	66.625	8,189.48	26,650 00	18,460.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29 339	34 875	26,622.12	31,387.50	4,765.38
LIN BROADCASTING CORP	02/03/87	26	32 43	67 00	843.38	1,742.00	898 64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	24.875	843.00	323 38	(519.62) #
MERCK & CO INC	12/23/86	900	13 22	48.625	11,968 62	43,762 50	31,793.88 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	37 50	25,730.60	30,000 00	4,269.40
PFIZER INC	06/18/91	700	58.437	77.25	41,313.66	54,075 00	12,761.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	82.00	24,798.83	41,000 00	16,201.17
SYSCO CORP	02/01/91	1,600	17.267	25.00	27,967.36	40,000 00	12,032.64
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	57.125	12,419.64	137,100.00	124,680.36 #
WASTE MANAGEMENT INC	11/14/90	700	33.875	33.125	24,020.53	23,187 50	(833 03)
Total value					$ 230,934.40	$ 472,102 68	$ 241,168.46

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS INC

LEHMAN BROTHERS

Preferred Client Statement

September 1 - September 30, 1992

Page 1
Ref: 0001 F2 Cusip: 15

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance	$ 104.27
Money funds	215,486.46
Accrued money fund dividends	285.31
Stocks	476,088.75
Direct investments	*(see Portfolio details)*
Net value this period	**$ 691,964.79**
Net value last period	**$ 686,612.16**

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .27	$ 16.35	$ 0.00
Dividends	688.00	5,880.25	0.00
Money funds earnings	397.93	94.66	3,106.82
Total	$ 1,086.20	$ 5,991.26	$ 3,106.82

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 11,982.68
Unrealized gain or (loss)	245,154.35	*Not applicable*

Bulletin board

Research Rankings Are Now On Your Statement.
As an added service, the research rankings of all common stocks followed by our analysts are featured in the Portfolio details section of your statement. Definitions of rankings appear on the back of the statement. For more information on our highly rated equity research, contact your Financial Consultant.

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Balance Sheet Statement

Ref: 0001/X/000/247

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 214,504.53
Interest credited	.27		
Dividends credited	668 00		
Money funds earnings reinvested	397 93		
Total	$ 1,066 20	$ 0.00	
Combined closing cash and money funds balance			$ 215,590 73

Cash	104 27
Money funds	215,486 46

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	215,486.46	$ 215,486.46	$ 285.31	2.715%	
Total value of money funds		$ 215,486 46	$ 285.31		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	1,000	$ 43 25	3 005%	$ 1,300 00	$ 43,250.00	1/M	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	63 75	4 329	1,104.00	25,500 00	2/L	Symbol: BMY\Rated: A +
DILLARD DEPT STORES INC CL A	NYSE	900	36 875	216	72 00	33,187 50	3/L	Symbol: DDS\Rated: A +
LIN BROADCASTING CORP	OTC	26	73 75			1,917 50	1/H	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	23 75			308 75	1/S	Symbol: MCAWA
MERCK & CO INC	NYSE	900	44 50	2 247	900 00	40,050 00	3/L	Symbol: MRK\Rated: A +
PEPSICO INC-NORTH CAROLINA	NYSE	800	37 875	1 372	416 00	30,300 00	2/L	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	74 75	1 979	1,036 00	52,325 00	1/L	Symbol: PFE\Rated: A +
PHILIP MORRIS COS INC	NYSE	500	84 75	3 067	1,300 00	42,375 00	2/L	Symbol: MO\Rated: A +
[illegible]	[illegible]	[illegible]	24 75	969	384 00	39,600 00		Symbol: SYY\Rated. A +

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

Statement for September 30, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
WAL-MART STORES INC NEW	NYSE	2,400	$ 59.125	.355%	$ 504.00	$ 141,900.00	2/M	Symbol: WMT\Rated: A +
WASTE MANAGEMENT INC	NYSE	700	36.25	1.434	364.00	25,375.00		Symbol: WMX\Rated: A
Total value of stocks					$ 7,380.00	$ 476,088.75		

*Please refer to the back of the statement for definitions of research rankings.

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
09/21/92	INTEREST ON CREDIT BALANCE	AT 3.043% 8/21 THRU 9/20	$ .27		$ .27
Total interest earned			$ .27	$ 0.00	$ .27

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
09/15/92	BANKAMERICA CORP	CASH DIV ON 1000 SHS RECORD 08/24/92 PAY 09/15/92	$ 325.00		$ 325.00
09/17/92	PFIZER INC	CASH DIV ON 700 SHS RECORD 08/07/92 PAY 09/17/92	259.00		259.00
09/30/92	PEPSICO INC-NORTH CAROLINA	CASH DIV ON 800 SHS RECORD 09/11/92 PAY 09/30/92	104.00		104.00
Total dividends earned			$ 688.00	$ 0.00	$ 688.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
09/11/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 08/17/92-09/13/92 28 DAYS AVERAGE YIELD 2.42 %.		$ 397.93	$ 397.93
Total earnings from money funds			$ 0.00	$ 397.93	$ 397.93

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 214,406 10
09/16/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	423.43	423.43
09/18/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	259.00	259.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	397.93	397.93
	Closing money funds balance			$ 215,486.46

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 43 25	$ 26,217.20	$ 43,250 00	$ 17,032.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	63.75	8,189.48	25,500.00	17,310.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29 339	36 875	26,622.12	33,187 50	6,565.38
LIN BROADCASTING CORP	02/03/87	26	32 43	73.75	843.38	1,917.50	1,074.14 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	23.75	843.00	308.75	(534.25) #
MERCK & CO INC	12/23/86	900	13 22	44.50	11,968.62	40,050.00	28,081.38 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	37.875	25,730.60	30,300.00	4,569.40
PFIZER INC	06/18/91	700	58.437	74.75	41,313.66	52,325.00	11,011.34
PHILIP MORRIS COS INC	11/14/90	500	49.00	84.75	24,798.83	42,375.00	17,576.17
SYSCO CORP	02/01/91	1,600	17.267	24.75	27,967.36	39,600.00	11,632.64
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	59.125	12,419.64	141,900.00	129,480.36 #
WASTE MANAGEMENT INC	11/14/90	700	33 875	36.25	24,020.53	25,375.00	1,354.47
Total value					$ 230,934.40	$ 476,088 76	$ 245,154 35

#Based on information supplied by your Financial Consultant.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tex Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Cash balance	$ 1 94
Money funds	205,850 92
Accrued money fund dividends	273 99
Stocks	458,115 88
Direct investments	*(see Portfolio details)*
Net value this period	**$ 664,242.73**
Net value last period	**$ 691,964.79**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ 1 94	$ 18 29	$ 0 00
Dividends	767.00	6,647.25	0 00
Money funds earnings	460.69	94 66	3,567.51
Total	**$ 1,229 63**	**$ 6,760 20**	**$ 3,567.51**

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 11.97	$ 11,994.63
Unrealized gain or (loss)	251,202.01	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Monthly Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 216,590.73
Securities bought and other subtractions		0.00	
Securities sold and other additions	24,032.50	-	
Withdrawals		-35,000.00	
Interest credited	1.94		
Dividends credited	767.00		
Money funds earnings reinvested	460.69		
Total	$ 25,262.13	$ -35,000.00	
Combined closing cash and money funds balance			$ 205,852.86

Cash	1.94
Money funds	205,850.92

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	205,850.92	$ 205,850.92	$ 273.99	2.376%	
Total value of money funds		$ 205,850.92	$ 273.99		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	1,000	$ 41.875	3.104%	$ 1,300.00	$ 41,875.00	1/H	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	68.125	4.051	1,104.00	27,250.00	2/L	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	900	41.875	.191	72.00	37,687.50	3/L	Symbol: DDS\Rated: A+
LIN BROADCASTING CORP	OTC	26	67.50			1,755.00	1/H	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	24.875			323.38	1/S	Symbol: MCAWA
MERCK & CO INC	NYSE	900	43.875	2.279	900.00	39,487.50	3/L	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	39.875	1.304	416.00	31,900.00	2/L	Symbol: PEP\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
PFIZER INC	NYSE	700	$ 75.625	1.957%	$ 1,036.00	$ 52,937.50	1/L	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	78.00	3.421	1,300.00	38,000.00	2/L	Symbol: MO\Rated: A+
SYSCO CORP	NYSE	1,600	25.50	.941	384.00	40,800.00		Symbol: SYY\Rated: A+
WAL-MART STORES INC NEW	NYSE	2,400	60.875	.344	504.00	146,100.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 7,016.00	$ 459,115.88		

*Please refer to the back of the statement for definitions of research rankings.

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
10/08/92	Sold	WASTE MANAGEMENT INC AVG PRICE SHOWN-DETAILS ON REQ	-700	$ 34.785	$ 24,032.50
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 24,032.50

Withdrawals

Date	Description	Reference no	Amount
10/14/92	CHECK 0086326278 PAID BY STROUDSBURG PA		$ 35,000.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
10/21/92	INTEREST ON CREDIT BALANCE	AT 2.600% 9/21 THRU 10/20	$ 1.94		$ 1.94
Total interest earned			$ 1.94	$ 0.00	$ 1.94

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
10/01/92	MERCK & CO INC	CASH DIV ON 900 SHS RECORD 09/04/92 PAY 10/01/92	$ 225.00		$ 225.00
10/01/92	WASTE MANAGEMENT INC	CASH DIV ON 700 SHS RECORD 09/16/92 PAY 10/01/92	91.00		91.00
10/05/92	WAL-MART STORES INC NEW	CASH DIV ON 2400 SHS RECORD 09/08/92 PAY 10/05/92	126.00		126.00
10/12/92	PHILIP MORRIS COS INC	CASH DIV ON 500 SHS RECORD 09/15/92 PAY 10/10/92	325.00		325.00
Total dividends earned			$ 767.00	$ 0.00	$ 767.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
10/09/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 09/14/92-10/11/92 26 DAYS AVERAGE YIELD 2.75 %.		$ 460.69	$ 460.69
Total earnings from money funds			$ 0.00	$ 460.69	$ 460.69

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 216,498.46
10/01/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	104.27	104.27
10/02/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	316.00	316.00
10/06/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	126.00	126.00

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds activity *continued*

Date	Activity	Description	Quantity	Amount
10/07/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	24,032.50	$ 24,032.50
10/07/92	Investment	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	24,032.50	24,032.50
10/07/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	24,032.50	-24,032.50
10/13/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	325.00	325.00
10/14/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	35,000.00	-35,000.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	480.89	480.89
		Closing money funds balance		$ 206,850.93

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
WASTE MANAGEMENT INC AVG PRICE SHOWN-DETAILS ON REQ	11/14/90	09/29/92 Sold	700	$ 33.875	$ 34.785	$ 24,020.53	$ 24,032.50	$ 11.97
Total (realized gain or (loss))						$ 24,020.53	$ 24,032.50	$ 11.97

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 41.875	$ 26,217.20	$ 41,875.00	$ 15,657.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	68.125	8,189.48	27,250.00	19,060.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29.339	41.875	26,622.12	37,687.50	11,065.38
LIN BROADCASTING CORP	02/03/87	26	32.43	67.50	843.38	1,755.00	911.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	24.875	843.00	323.38	(519.62) #
MERCK & CO INC	12/23/88	900	13.22	43.875	11,968.62	39,487.50	27,518.88 #
PEPSICO INC-NORTH CAROLINA	08/01/91	800	31.75	39.875	25,730.60	31,900.00	6,169.40

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
PFIZER INC	06/18/91	700	$ 58.437	$ 75.625	$ 41,313.66	$ 52,937.50	$ 11,623.84
PHILIP MORRIS COS INC	11/14/90	500	49.00	76.00	24,798.83	38,000.00	13,201.17
SYSCO CORP	02/01/91	1,600	17.267	25.50	27,967.36	40,800.00	12,832.64
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	60.875	12,419.64	146,100.00	133,680.36 #
Total value					$ 206,913.87	$ 458,115.88	$ 251,202.01

#Based on information supplied by your Financial Consultant.

et: 000143 2 0007 0000

November 1 - November 30, 1992

EDWARD GEORGE RAHALL TRUSTEE
UIAID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Cash balance	$ 96.11
Money funds	206,600.15
Accrued money fund dividends	189.23
Stocks	485,691.75
Direct Investments	*(see Portfolio details)*
Net value this period	$ 692,577.24
Net value last period	$ 684,242.73

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ .11	$ 18.40	$ 0.00
Dividends	390.00	7,037.25	0.00
Money funds earnings	453.29	94.66	4,020.80
Total	$ 843.40	$ 7,150.31	$ 4,020.80

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 11,994.63
Unrealized gain or (loss)	278,777.88	*Not applicable*

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 205,852.86
Withdrawals		0.00	
Interest credited	.11		
Dividends credited	390.00		
Money funds earnings reinvested	453.29		
Total	$ 843.40	$ 0.00	
Combined closing cash and money funds balance			$ 206,696.26

Cash	96 11
Money funds	206,600.15

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 11/30/92

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	206,600 15	$ 206,600.15	$ 189 23	2.261%	
Total value of money funds		$ 206,600.15	$ 189.23		

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
BANKAMERICA CORP	NYSE	1,000	$ 46.625	2.788%	$ 1,300.00	$ 46,625.00	1/H	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	67.125	4.111	1,104.00	26,850.00	2/L	Symbol: BMY\Rated: A+
DILLARD DEPT STORES INC CL A	NYSE	900	50.375	.158	72.00	45,337.50	3/L	Symbol: DDS\Rated: A+
LIN BROADCASTING CORP	OTC	26	78 25			2,034.50	2/H	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	33 25			432 25	1/S	Symbol: MCAWA
MERCK & CO INC	NYSE	900	45 125	2 216	900 00	40,612.50	3/L	Symbol: MRK\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	40 75	1 276	416 00	32,600.00	2/L	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	78 125	1 894	1,036 00	54,687.50	1/L	Symbol: PFE\Rated: A+
PHILIP MORRIS COS INC	NYSE	500	79 625	3 265	1,300.00	39,812.50	1/L	Symbol: MO\Rated: A+

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EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks *continued*

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
SYSCO CORP	NYSE	1,600	$ 26.375	1.061%	$ 448.00	$ 42,200.00		Symbol: SYY\Rated: A+
WAL-MART STORES INC NEW	NYSE	2,400	64.375	.326	504.00	154,500.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 7,080.00	$ 485,691.75		

*Please refer to the back of the statement for definitions of research rankings.

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000 00	Purchase date 09/30/88
Total direct investments	$ 20,000 00	

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
11/23/92	INTEREST ON CREDIT BALANCE	AT 3.044% 10/21 THRU 11/22	$ .11		$ .11
Total interest earned			$ .11	$ 0.00	$ .11

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
11/02/92	BRISTOL MYERS SQUIBB CO	CASH DIV ON 400 SHS RECORD 10/02/92 PAY 11/01/92	$ 276.00		$ 276.00
11/02/92	DILLARD DEPT STORES INC CL A	CASH DIV ON 900 SHS RECORD 09/30/92 PAY 11/01/92	18.00		18.00
11/13/92	SYSCO CORP	CASH DIV ON 1600 0000 SHS RECORD 10/30/92 PAY 11/13/92	96.00		96.00
Total dividends earned			$ 390.00	$ 0 00	$ 390 00

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
11/13/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 10/12/92-11/15/92 35 DAYS AVERAGE YIELD 2.26 %.		$ 453.29	$ 453.29
Total earnings from money funds			$ 0.00	$ 453.29	$ 453.29

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 205,850.92
11/03/92	Autoinvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	295.94	295.94
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	453.29	453.29
	Closing money funds balance			$ 206,600.15

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
BANKAMERICA CORP	01/21/91	1,000	$ 25.875	$ 46.625	$ 26,217.20	$ 46,625.00	$ 20,407.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	67.125	8,189.48	26,850.00	18,660.52 #
DILLARD DEPT STORES INC CL A	01/30/91	900	29.339	50.375	26,622.12	45,337.50	18,715.38
LIN BROADCASTING CORP	02/03/87	26	32.43	78.25	843.36	2,034.50	1,191.14 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	33.25	843.00	432.25	(410.75) #
MERCK & CO INC	12/23/86	900	13.22	45.125	11,968.62	40,612.50	28,643.88 #
PEPSICO INC-NORTH CAROLINA	08/01/91	600	31.75	40.75	25,730.60	32,600.00	6,869.40
PFIZER INC	06/18/91	700	58.437	78.125	41,313.66	54,687.50	13,373.84
PHILIP MORRIS COS INC	11/14/90	500	49.00	79.625	24,798.83	39,812.50	15,013.67
SYSCO CORP	02/01/91	1,600	17.267	26.375	27,967.38	42,200.00	14,232.64
WAL-MART STORES INC NEW	01/15/85	2,400	5.10	64.375	12,419.64	154,500.00	142,080.36 #
Total value					$ 206,913.87	$ 485,691.75	$ 278,777.88

#Based on information supplied by your Financial Consultant.

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Preferred Client Statement
December 1 - December 31, 1992

EDWARD GEORGE RAHALL TRUSTEE
U/AID 12/10/82 FBO
N JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08087-15 240
Tax Id number 55-6085192

As you requested, copies of this statement have also been sent to:

SHEARSON ASSET MGT
JAMES T SHEPHERD
CONGRESSMAN NICK J. RAHALL II

Account value

Cash balance	$ 3.44
Money funds	110,660.00
Accrued money fund dividends	0.00
Stocks	601,224.50
Direct investments	*(see Portfolio details)*
Net value this period	$ 711,887.94
Net value last period	$ 692,577.24

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Interest	$ 3.58	$ 21.98	$ 0.00
Dividends	584.00	7,821.25	0.00
Money funds earnings	518.70	94.66	4,539.50
Total	$ 1,106.28	$ 7,737.89	$ 4,539.50

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 14,158.98	$ 28,153.61
Unrealized gain or (loss)	273,583.51	*Not applicable*

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EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 206,696.26
Securities bought and other subtractions		-136,096.91	
Securities sold and other additions	38,657.81		
Withdrawals		0.00	
Interest credited	3.58		
Dividends credited	584.00		
Money funds earnings reinvested	518.70		
Total	$ 40,064.09	$ -136,096.91	
Combined closing cash and money funds balance			$ 110,663.44

Cash	3.44
Money funds	110,660.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	110,660.00	$ 110,660.00		2.72%	
Total value of money funds		$ 110,660.00	$ 0.00		

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
ALLIED SIGNAL INC	NYSE	800	$ 60.50	1.652%	$ 800.00	$ 48,400.00	1/M	Symbol: ALD\Rated: B-
AMERICAN EXPRESS CO	NYSE	100	24.875	4.02	100.00	2,487.50		Symbol: AXP\Rated: B+
AMGEN INC	OTC	200	70.625			14,125.00	1/M	Symbol: AMGN\Rated: B-
BANKAMERICA CORP	NYSE	1,000	46.50	2.795	1,300.00	46,500.00	1/H	Symbol: BAC\Rated: B-
BRISTOL MYERS SQUIBB CO	NYSE	400	67.50	4.268	1,152.00	27,000.00	2/L	Symbol: BMY\Rated: A+
CHRYSLER CORP	NYSE	50	32.00	1.875	30.00	1,600.00	2/H	Symbol: C\Rated: B
CITICORP	NYSE	1,500	22.25			33,375.00	1/H	Symbol: CCI\Rated: C

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

December 1 - December 31, 1992

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Stocks
continued

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
DILLARD DEPT STORES INC CL A	NYSE	900	$ 49.75	.16%	$ 72.00	$ 44,775.00	3/L	Symbol: DDS\Rated: A+
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	200	23.75	2.623	124.80	4,750.00	3/L	Symbol: GLX
LIN BROADCASTING CORP	OTC	26	76.50			1,989.00	2/H	Symbol: LINB\Rated: B-
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	13	33.50			435.50	1/S	Symbol: MCAWA
MERCK & CO INC	NYSE	900	43.375	2.305	900.00	39,037.50	3/L	Symbol: MRK\Rated: A+
MINNESOTA MINING & MFG CO	NYSE	300	100.625	3.18	960.00	30,187.50		Symbol: MMM\Rated: A+
PEPSICO INC-NORTH CAROLINA	NYSE	800	41.50	1.253	416.00	33,200.00	2/L	Symbol: PEP\Rated: A
PFIZER INC	NYSE	700	72.50	2.041	1,036.00	50,750.00	1/L	Symbol: PFE\Rated: A+
PROCTER & GAMBLE CO	NYSE	500	53.625	2.051	550.00	26,812.50	3/L	Symbol: PG\Rated: A
SYSCO CORP	NYSE	1,600	26.375	1.061	448.00	42,200.00		Symbol: SYY\Rated: A+
WAL-MART STORES INC NEW	NYSE	2,400	64.00	.328	504.00	153,600.00	2/M	Symbol: WMT\Rated: A+
Total value of stocks					$ 8,392.80	$ 601,224.50		

*Please refer to the back of the statement for definitions of research rankings.

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
SCOTTSDALE LAND TRUST L P	$ 20,000.00	Purchase date 09/30/88
Total direct investments	$ 20,000.00	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/03/92	Bought	MINNESOTA MINING & MFG CO	300	$ 102.375	$ -30,937.45
12/03/92	Bought	PROCTER & GAMBLE CO	500	54.625	-27,638.09
12/31/92	Sold	PHILIP MORRIS COS INC AVG PRICE SHOWN DETAILS ON REQ	-500	78.668	38,957.81

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Investment activity *continued*

Date	Activity	Description	Quantity	Price	Amount
12/23/92	Bought	ALLIED SIGNAL INC AVG PRICE SHOWN-DETAILS ON REQ	800	$ 59.548	$ -48,082.78
12/23/92	Bought	CITICORP AVG PRICE SHOWN-DETAILS ON REQ	1,500	19.36	-29,438.59
Total securities bought and other subtractions					$ -136,096.91
Total securities sold and other additions					$ 38,957.81

Other security activity

Date	Activity	Description	Quantity
12/16/92	Journal	AMGEN INC FROM 685-03355-02 TO 685-08087-01	100
12/16/92	Journal	CHRYSLER CORP FROM 685-03355-02 TO 685-08087-01	50
12/22/92	Journal	AMERICAN EXPRESS CO FROM 685-03355-02 TO 685 08087-01	100
12/22/92	Journal	*** GLAXO HOLDINGS PLC SPONSORED ADR FROM 685-03355-02 TO 685-08087-01	200
12/24/92	Journal	AMGEN INC FROM 685-03355-02 TO 685-08087-01	100

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
12/21/92	INTEREST ON CREDIT BALANCE	AT 3.283% 11/23 THRU 12/20	$ .14		$ .14
12/31/92	INTEREST ON CREDIT BALANCE	AT 3.178% 12/21 THRU 12/30	3.44		3.44
Total interest earned			$ 3.58	$ 0.00	$ 3.58

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EDWARD GEORGE RAHALL TRUSTEE

Account number 885-08087-15 240

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/14/92	BANKAMERICA CORP	CASH DIV ON 1000.0000 SHS RECORD 11/23/92 PAY 12/14/92	$ 325.00		$ 325.00
12/17/92	PFIZER INC	CASH DIV ON 700.0000 SHS RECORD 11/20/92 PAY 12/17/92	259.00		259.00
Total dividends earned			$ 584.00	$ 0.00	$ 584.00

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
12/11/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 11/16/92-12/13/92 28 DAYS AVERAGE YIELD 2.19 %.		$ 313.31	$ 313.31
12/31/92	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	REINVESTED FOR PERIOD 12/14/92-12/31/92 18 DAYS AVERAGE YIELD 2.72 %.		205.39	205.39
Total earnings from money funds			$ 0.00	$ 518.70	$ 518.70

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 206,600.15
12/03/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	58,479.43	-58,479.43
12/15/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	325.00	325.00
12/18/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	259.00	259.00
12/22/92	AutoInvest	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	38,957.95	38,957.95
12/23/92	Redemption	AMERICAN EXPRESS® MUNICIPAL MONEY MARKET FUND	77,521.37	-77,521.37
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	518.70	518.70
	Closing money funds balance			$ 110,660.00

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
PHILIP MORRIS COS INC AVG PRICE SHOWN-DETAILS ON REQ	11/14/90	12/14/92 Sold	500	$ 49.00	$ 78.668	$ 24,798.83	$ 38,957.81	$ 14,158.98
Total realized gain or (loss)						$ 24,798.83	$ 38,957.81	$ 14,158.98

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
ALLIED SIGNAL INC	12/16/92	800	$ 59.548	$ 60.50	$ 48,082.78	$ 48,400.00	$ 317.22
AMERICAN EXPRESS CO	03/19/87	100	39.875	24.875	4,021.80	2,487.50	(1,534.30) #
AMGEN INC	02/08/90	200	9.083	70.625	1,816.67	14,125.00	12,308.33
BANKAMERICA CORP	01/21/91	1,000	25.875	46.50	26,217.20	46,500.00	20,282.80
BRISTOL MYERS SQUIBB CO	07/12/83	400	20.18	67.50	8,189.48	27,000.00	18,810.52 #
CHRYSLER CORP	07/29/92	50	22.375	32.00	1,140.58	1,600.00	459.42
CITICORP	12/16/92	1,500	19.36	22.25	29,438.59	33,375.00	3,936.41
DILLARD DEPT STORES INC CL A	01/30/91	900	29.339	49.75	26,622.12	44,775.00	18,152.88
*** GLAXO HOLDINGS PLC SPONSORED ADR	09/12/91	200	12.062	23.75	2,449.99	4,750.00	2,300.01
LIN BROADCASTING CORP	02/03/87	26	32.43	76.50	843.36	1,989.00	1,145.64 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	02/03/87	13	60.57	33.50	843.00	435.50	(407.50) #
MERCK & CO INC	12/23/86	900	13.22	43.375	11,968.62	39,037.50	27,068.88 #
MINNESOTA MINING & MFG CO	11/25/92	300	102.375	100.625	30,937.45	30,187.50	(749.95)
PEPSICO INC-NORTH CAROLINA	08/01/91	600	31.75	41.50	25,730.60	33,200.00	7,469.40
PFIZER INC	06/18/91	700	58.437	72.50	41,313.66	50,750.00	9,436.34
PROCTER & GAMBLE CO	11/25/92	500	54.625	53.625	27,638.09	26,812.50	(625.59)
SYSCO CORP	02/01/91	1,600	17.267	26.375	27,967.36	42,200.00	14,232.64

SHEARSON LEHMAN BROTHERS

EDWARD GEORGE RAHALL TRUSTEE

Account number 685-08087-15 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
WAL-MART STORES INC NEW	01/15/85	2,400	$ 5.10	$ 64.00	$ 12,419.64	$ 153,600.00	$ 141,180.36 #
Total value					**$ 327,640.99**	**$ 601,224.50**	**$ 273,583.51**

#Based on information supplied by your Financial Consultant.

Important Administrative Notice. Effective February 15, 1993, we will assess a $50 charge for any account closed when assets are transferred to another financial institution. This fee will cover related costs incurred by this transfer.

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-8950	53-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

#3

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
		$124,883.83	$124,883.83

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	124,696.66	124,883.83
TOTAL MONEY MARKET		124,883.83

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
GSP DIVIDENDS CREDITED	187.17CR	187.17CR
AVERAGE YIELD ON MONEY MARKET	1/01/92 TO 1/15/92	3.81%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 16	1	DIVIDEND	187.17	REINVESTED DIVIDEND GSP AS OF 1/15/92			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		HORIZON BANCORP INC	N/A	
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.		
MF	4548.983		MFS GOVT INCOME PLUS TR (AS OF 1/24)	6.9400	31,569.94

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1-01-002 WWBLD 3

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Wheat Butcher & Singer

[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	2

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

TO INSURE ACCURACY FOR OUR RECORDS AND THOSE REQUIRED BY THE INTERNAL REVENUE SERVICE, PLEASE VERIFY THAT THE TAX ID NUMBERT LISTED ON THIS STATEMENT IS CORRECT. SHOULD A DISCREPANCY EXIST, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

1-92-002 WWSLD 35

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

MAR 06 1992

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO M JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
		$125,307.11	$125,307.11

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	124,883.83	125,307.11
TOTAL MONEY MARKET		125,307.11

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
GSP DIVIDENDS CREDITED	423.28CR	610.45CR
AVERAGE YIELD ON MONEY MARKET	1/16/92 TO 2/18/92	3.62%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 19	1	DIVIDEND	423.28	REINVESTED DIVIDEND GSP AS OF 2/18/92			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		HORIZON BANCORP INC	N/A	
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.		
MF	4587.937		MFS GOVT INCOME PLUS TR (AS OF 2/21)	6.8000	31,197.97

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2-01-002 WWBLD

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	2

MF - THESE BALANCES ARE HELD ON THE BOOKS OF THE MUTUAL FUND COMPANY. DUE TO THE DIFFERENT REPORTING DATES, BALANCES MAY VARY FROM THOSE REPORTED BY THE FUND. THE VALUE OF THIS POSITION IS NOT INCLUDED IN THE TOTAL ACCOUNT VALUE.

IF YOU ARE ROLLING OVER AN IRA OR HAVE CDS MATURING SOON, ASK YOUR FINANCIAL CONSULTANT FOR SUGGESTIONS ABOUT CONSERVATIVE ALTERNATIVE INVESTMENTS THAT MAY PAY CONSIDERABLY MORE THAN WHAT YOU ARE PRESENTLY RECEIVING.

---END OF STATEMENT---

3-92-002 WWBLD

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$12,975.00	$4,466.000B	$94,947.36	$103,456.36

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	4,466.000B
NET CLOSING BALANCE		4,466.000B

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	125,307.11	94,947.36
TOTAL MONEY MARKET		94,947.36

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	60.00CR	60.00CR
GSP DIVIDENDS CREDITED	319.89CR	930.34CR
AVERAGE YIELD ON MONEY MARKET	2/19/92 TO 3/16/92	3.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 03	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,000.00
3 04	1	CHECK ISSUED		CHECK ISSUED #13220142 MMKT WITHDRAWAL		3,000.00	
3 12	1	PURCHASE	300	AMER HEALTH PROPERTIES INC	28.6250	8,775.91	
3 16	1	SALE	4627.862-	MFS GOVT INCOME PLUS - TRUST SBI AS OF 3/13/92	6.7100		31,042.95
3 17	1	PURCHASE	6907	COLONIAL U S GOVT TR - TRUST FUND AS OF 3/16/92	7.2400	50,006.68	
3 17	1	DIVIDEND	319.89	REINVESTED DIVIDEND GSP AS OF 3/16/92			
3 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		8,775.91

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BX08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 20	1	RECEIVED	4627.862	MFS GOVT INCOME PLUS - TRUST $81			
3 23	1	TO PLAN ACCT	6907-	COLONIAL U S GOVT TR - TRUST FUND			
3 23	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		18,963.73
3 24	1	DIVIDEND		HORIZON BANCORP INC QUANTITY 300			60.00
3 30	1	PURCHASE	300	CB&T FINANCIAL CORP	14.8750	4,466.00	
3 31	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	60.00	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMER HEALTH PROPERTIES INC	29.2500	8,775.00
1	300		CB&T FINANCIAL CORP	14.0000	4,200.00
1	300		HORIZON BANCORP INC	N/A	
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		12,975.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

INTRODUCING THE CAMBRIDGE FAMILY OF FUNDS, A FINANCIAL RESOURCE THAT YOU CAN USE THROUGHOUT YOUR LIFE TO PURSUE YOUR MAJOR FINANCIAL GOALS. SEE PAGE 3 OF THE ENCLOSED INVESTOR'S SPECTRUM, THEN CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER DETAILS.

---END OF STATEMENT---

7-02-002 WWBLD 8

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[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8408 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL

**DUPLICATE FOR THE ACCOUNT OF*
EDWARD GEORGE RAHALL TTEE
FBO N JOE RAHALL II
U/A DTD 12/10/82
216 1/2 MAIN ST

RICK RAHALL
383 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
8[illegible],262.50		$77,968.99	$104,231.49

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,466.00DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	94,947.36	77,968.99
TOTAL MONEY MARKET		77,968.99

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	60.00CR
GSP DIVIDENDS CREDITED	272.72CR	1,203.06CR
AVERAGE YIELD ON MONEY MARKET	3/17/92 TO 4/15/92	3.48%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	1	PURCHASE	200	SAFETY KLEEN CORP	25.7500	5,280.42	
4 06	1	PURCHASE	100	NATIONSBANK CORP	45.2500	4,617.82	
4 06	1	PURCHASE	200	WACKENHUT CORPORATION	28.2500	5,787.60	
4 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,466.00
4 08	1	PURCHASE	100	COLGATE-PALMOLIVE CO	45.7500	4,678.52	
4 08	1	PURCHASE	100	WACKENHUT CORPORATION	27.2500	2,801.39	
4 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,280.42
4 13	1	SALE	200-	SAFETY KLEEN CORP	28.5000		5,561.50
4 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,405.42
4 14	1	SALE	100-	COLGATE-PALMOLIVE CO	49.1250		4,819.16
4 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		7,479.91
4 16	1	DIVIDEND	272.72	REINVESTED DIVIDEND GSP			

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 4/15/92			
4 16	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,678.52
4 21	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,678.52	
4 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,561.50	
4 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,819.16	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		AMER HEALTH PROPERTIES INC	29.6250	8,887.50
1	300		CB&T FINANCIAL CORP	14.0000	4,200.00
1	300		HORIZON BANCORP INC	N/A	
1	100		NATIONSBANK CORP	47.7500	4,775.00
1	300		WACKENHUT CORPORATION	28.0000	8,400.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		26,262.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

HAVE YOU TAKEN ADVANTAGE OF THE RECENT ENHANCEMENTS TO THE CASH RESOURCES ACCOUNT? FOR MORE INFORMATION, PLEASE SEE THIS MONTH'S INVESTOR'S SPECTRUM. IF YOU DO NOT HAVE A CRA ACCOUNT, CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

8-02-002 WWBLD 11/

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$26,662.50		$78,246.04	$104,908.54

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	77,968.99	78,246.04
TOTAL MONEY MARKET		78,246.04

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	205.50CR	265.50CR
GSP DIVIDENDS CREDITED	192.29CR	1,395.35CR
AVERAGE YIELD ON MONEY MARKET	4/16/92 TO 5/15/92	3.27%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 01	1	SALE	100-	NATIONSBANK CORP	47.8750		4,702.45
5 01	1	PURCHASE	300	SERVICEMASTER LTD PTNRSP PUB PARTNERSHIP SH	22.6250	6,950.07	
5 04	1	PURCHASE	200	ANGELICA CORPORATION	30.2500	6,193.34	
5 04	1	PURCHASE	300	JWP INC	15.0000	4,627.86	
5 06	1	SALE	300-	SERVICEMASTER LTD PTNRSP PUB PARTNERSHIP SH	24.1250		7,093.58
5 07	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,950.07
5 11	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,118.75
5 12	1	SALE	300-	AMER HEALTH PROPERTIES INC	30.1250		8,871.55
5 12	1	PURCHASE	100	ANGELICA CORPORATION	29.3750	3,017.05	
5 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,093.58	
5 18	1	DIVIDEND	192.29	REINVESTED DIVIDEND GSP AS OF 5/15/92			
5 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,854.50	
5 22	1	DIVIDEND		AMER HEALTH PROPERTIES			205.50

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3-01-002 WWBLD E

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				INC QUANTITY 300			
5 26	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	205.50	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		ANGELICA CORPORATION	31.0000	9,300.00
1	300		CB&T FINANCIAL CORP	14.2500	4,275.00
1	300		HORIZON BANCORP INC	N/A	
1	300		JWP INC	14.0000	4,200.00
1	300		WACKENHUT CORPORATION	29.6250	8,887.50
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		26,662.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

SUMMERTIME IS ALWAYS A GOOD TIME TO TAKE A LOOK AT YOUR INVESTMENT PORTFOLIO TO BE SURE IT IS ON TARGET WITH YOUR CURRENT INVESTMENT OBJECTIVES. IF YOU WOULD LIKE TO REVIEW YOUR INVESTMENTS, PLEASE CALL YOUR FINANCIAL CONSULTANT FOR AN APPOINTMENT.

---END OF STATEMENT---

3-89-000 WWBLD 877

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$47,262.50	$18,352.43DB	$76,444.07	$105,354.14

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	18,352.43DB
NET CLOSING BALANCE		18,352.43DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	78,246.04	76,444.07
TOTAL MONEY MARKET		76,444.07

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	124.00CR	389.50CR
GSP DIVIDENDS CREDITED	206.75CR	1,602.10CR
AVERAGE YIELD ON MONEY MARKET	5/16/92 TO	6/15/92 3.14%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 01	1	DIVIDEND		WACKENHUT CORPORATION QUANTITY 300			45.00
6 02	1	SALE	100-	HORIZON BANCORP INC	17.3750		1,734.00
6 02	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	45.00	
6 15	1	DIVIDEND		CB&T FINANCIAL CORP QUANTITY 300			39.00
6 16	1	DIVIDEND	206.75	REINVESTED DIVIDEND GSP AS OF 6/15/92			
6 16	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	1,773.00	
6 19	1	PURCHASE	300	JWP INC	12.5000	3,866.72	
6 22	1	DIVIDEND		HORIZON BANCORP INC QUANTITY 200			40.00
6 23	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	40.00	

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat Butcher & Singer

[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6339-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
383 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 26	1	PURCHASE	200	CLOROX COMPANY	43.6250	8,906.75	
6 26	1	PURCHASE	200	PROCTER & GAMBLE CO	46.3750	9,445.68	
6 26	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,866.72

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		ANGELICA CORPORATION	29.7500	8,925.00
1	300		CB&T FINANCIAL CORP	15.5000	4,650.00
1	200		CLOROX COMPANY	45.3750	9,075.00
1	200		HORIZON BANCORP INC	N/A	
1	600		JWP INC	12.2500	7,350.00
1	200		PROCTER & GAMBLE CO	46.0000	9,200.00
1	300		WACKENHUT CORPORATION	26.8750	8,062.50
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		47,262.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

OUR CONSOLIDATED STATEMENT OF FINANCIAL CONDITION FOR THE FISCAL YEAR ENDED MARCH 31, 1992 IS ENCLOSED IN LIEU OF THE INVESTOR'S SPECTRUM. THE NEXT ISSUE OF THE INVESTOR'S SPECTRUM WILL BE IN THE JULY STATEMENTS, WHICH WILL BE MAILED EARLY IN AUGUST.

---END OF STATEMENT---

1-02-002 WWBLD 70

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$41,537.50		$62,357.90	$103,895.40

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	18,352.43DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	76,444.07	62,357.90
TOTAL MONEY MARKET		62,357.90

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	69.00CR	458.50CR
GSP DIVIDENDS CREDITED	181.76CR	1,783.86CR
AVERAGE YIELD ON MONEY MARKET	6/16/92 TO 7/15/92	2.98%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 01	1	DIVIDEND		ANGELICA CORPORATION QUANTITY 300			69.00
7 01	1	SALE	200-	CLOROX COMPANY	46.1250		9,069.77
7 06	1	SALE	200-	PROCTER & GAMBLE CO	48.8750		9,611.30
7 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		18,283.43
7 10	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,069.77	
7 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,611.30	
7 15	1	PURCHASE	300	GREATER CHINA FUND INC	15.0000	4,500.00	
7 16	1	PURCHASE	300	JARDINE FLEMING CHINA REGION FD INC	15.0000	4,500.00	
7 16	1	DIVIDEND	181.76	REINVESTED DIVIDEND GSP AS OF 7/15/92			
7 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,500.00

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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601 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 23	1	PURCHASE	300	ZWEIG FUND INC	12.7500	3,942.84	
7 23	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,500.00
7 24	1	PURCHASE	300	GERMANY FUND INC F	11.0000	3,410.04	
7 24	1	PURCHASE	200	GREATER CHINA FUND INC F	13.1250	2,716.64	
7 24	1	SALE	300-	JARDINE FLEMING CHINA F REGION FD INC	15.0000		4,403.95
7 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,942.84
7 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,722.73

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	300		ANGELICA CORPORATION	30.6250	9,187.50
1	300		CB&T FINANCIAL CORP	16.7500	5,025.00
1	300		GERMANY FUND INC F	11.1250	3,337.50
1	500		GREATER CHINA FUND INC F	13.2500	6,625.00
1	200		HORIZON BANCORP INC	N/A	
1	600		JWP INC	8.6250	5,175.00
1	300		WACKENHUT CORPORATION	27.6250	8,287.50
1	300		ZWEIG FUND INC	13.0000	3,900.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		41,537.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IF YOU HAD MUNICIPAL BONDS CALLED RECENTLY, OR EXPECT TO HAVE MUNICIPAL BONDS CALLED IN THE FUTURE, WE SUGGEST READING THE ARTICLE ON PAGE 3 OF INVESTOR'S SPECTRUM INCLUDED WITH THIS STATEMENT. FOR MORE INFORMATION, CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

2-02-002 WWBLD 13507

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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801 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8KD8 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$74,675.00	$18,873.78DB	$44,662.83	$100,464.05

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	18,873.78DB
NET CLOSING BALANCE		18,873.78DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	62,357.90	44,662.83
TOTAL MONEY MARKET		44,662.83

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	458.50CR
GSP DIVIDENDS CREDITED	164.01CR	1,947.87CR
AVERAGE YIELD ON MONEY MARKET	7/16/92 TO 8/17/92	2.66%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 04	1	SALE	300-	ANGELICA CORPORATION	31.3750		9,241.96
8 05	1	PURCHASE	400	JWP INC	6.2500	2,590.54	
8 12	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,651.42	
8 17	1	PURCHASE	200	ZWEIG FUND INC	13.0000	2,691.27	
8 18	1	DIVIDEND	164.01	REINVESTED DIVIDEND GSP AS OF 8/17/92			
8 20	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,000.00
8 21	1	PURCHASE	150	AMERICAN TELEPHONE AND TELEGRAPH CO	43.0000	6,614.43	
8 21	1	PURCHASE	100	EASTMAN KODAK COMPANY	44.0000	4,501.28	
8 21	1	PURCHASE	100	INTERNATIONAL BUSINESS MACHINE CORP	86.0000	8,703.52	
8 21	1	CHECK ISSUED		CHECK ISSUED #13221077		2,000.00	

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S-01-002 WWBLD

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8A08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				MMKT WITHDRAWAL			
8 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,691.27
8 26	1	PURCHASE	100	ANHEUSER BUSCH COS INC	53.5000	5,453.52	
8 26	1	PURCHASE	200	CLOROX COMPANY	42.7500	8,729.24	
8 28	1	PURCHASE	100	GANNETT CO INC DEL	45.8750	4,691.02	
8 28	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		19,819.23

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	150		AMERICAN TELEPHONE AND TELEGRAPH CO	42.2500	6,337.50
1	100		ANHEUSER BUSCH COS INC	53.8750	5,387.50
1	300		CB&T FINANCIAL CORP	16.5000	4,950.00
1	200		CLOROX COMPANY	44.7500	8,950.00
1	100		EASTMAN KODAK COMPANY	44.2500	4,425.00
1	100		GANNETT CO INC DEL	47.0000	4,700.00
1	300		GERMANY FUND INC F	11.2500	3,375.00
1	500		GREATER CHINA FUND INC F	13.2500	6,625.00
1	200		HORIZON BANCORP INC	N/A	
1	100		INTERNATIONAL BUSINESS MACHINE CORP	86.6250	8,662.50
1	1000		JWP INC	6.6250	6,625.00
1	300		WACKENHUT CORPORATION	27.1250	8,137.50
1	500		ZWEIG FUND INC	13.0000	6,500.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER $	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		74,675.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

S-02-002 WWBLD

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[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BA08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$67,318.75	$5,072.55CR	$28,902.63	$101,293.93

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	18,873.78DB	5,072.55CR
NET CLOSING BALANCE		5,072.55CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	44,662.83	28,902.63
TOTAL MONEY MARKET		28,902.63

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	127.00CR	585.50CR
GSP DIVIDENDS CREDITED	89.23CR	2,037.10CR
AVERAGE YIELD ON MONEY MARKET	8/18/92 TO 9/15/92	2.57%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 01	1	DIVIDEND		WACKENHUT CORPORATION QUANTITY 300			45.00
9 02	1	SALE	400-	JWP INC	7.500D		2,897.35
9 02	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		14,137.76
9 04	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,691.02
9 15	1	DIVIDEND		CB&T FINANCIAL CORP QUANTITY 300			42.00
9 15	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,897.35	
9 16	1	DIVIDEND	89.23	REINVESTED DIVIDEND GSP AS OF 9/15/92			
9 22	1	DIVIDEND		HORIZON BANCORP INC QUANTITY 200			40.00
9 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	42.00	

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 29	1	SALE	300-	CB&T FINANCIAL CORP	17.3750		5,072.55
9 29	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	40.00	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	150		AMERICAN TELEPHONE AND TELEGRAPH CO	43.6250	6,543.75
1	100		ANHEUSER BUSCH COS INC	55.5000	5,550.00
1	200		CLOROX COMPANY	43.3750	8,675.00
1	100		EASTMAN KODAK COMPANY	44.5000	4,450.00
1	100		GANNETT CO INC DEL	48.0000	4,800.00
1	300		GERMANY FUND INC F	12.0000	3,600.00
1	500		GREATER CHINA FUND INC F	12.6250	6,312.50
1	200		HORIZON BANCORP INC	N/A	
1	100		INTERNATIONAL BUSINESS MACHINE CORP	80.7500	8,075.00
1	600		JWP INC	7.7500	4,650.00
1	300		WACKENHUT CORPORATION	27.6250	8,287.50
1	500		ZWEIG FUND INC	12.7500	6,375.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		67,318.75

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IF THE YIELD ON YOUR CDS IS DISAPPOINTING, WHY NOT CALL YOUR FINANCIAL CONSULTANT FOR A COPY OF OUR NEW BOOKLET "SIX WAYS TO EARN SIX PERCENT OR MORE?" IT CARRIES A WEALTH OF INFORMATION FOR CONSERVATIVE INVESTORS. SEE LEAFLET ENCLOSED.

---END OF STATEMENT---

1-92-462 WWBLD 77

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$62,956.25	$4,973.30CR	$40,930.66	$108,860.21

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	5,072.55CR	4,973.30CR
NET CLOSING BALANCE		4,973.30CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	28,902.63	40,930.66
TOTAL MONEY MARKET		40,930.66

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	222.00CR	607.50CR
GSP DIVIDENDS CREDITED	59.47CR	2,096.57CR
AVERAGE YIELD ON MONEY MARKET	9/16/92 TO 10/15/92	2.42%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	DIVIDEND		EASTMAN KODAK COMPANY QUANTITY 100			50.00
10 01	1	DIVIDEND		GANNETT CO INC DEL QUANTITY 100			32.00
10 06	1	PURCHASE	100	BRISTOL MYERS SQUIBB CO	62.7500	6,378.52	
10 06	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	82.00	
10 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,072.55	
10 13	1	SALE	200-	HORIZON BANCORP INC	21.2500		4,145.80
10 14	1	PURCHASE	400	GABELLI EQUITY TRUST INC	9.6250	3,969.39	
10 14	1	PURCHASE	100	GABELLI EQUITY TRUST INC	9.6250	992.35	
10 14	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,378.52
10 16	1	DIVIDEND	59.47	REINVESTED DIVIDEND GSP AS OF 10/15/92			

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5-91-003 WWBLD 38.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		27,738.13
10 19	1	DEPOSIT		SHEARSON LEHMAN BROTHERS			35,000.00
10 20	1	SALE	100-	BRISTOL MYERS SQUIBB CO	67.0000		6,606.60
10 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	34,184.06	
10 20	1	CHECK ISSUED		CHECK ISSUED #13221398 MMKT WITHDRAWAL		27,738.13	
10 26	1	DIVIDEND		ZWEIG FUND INC QUANTITY 500			140.00
10 27	1	SALE	100-	GANNETT CO INC DEL	50.6250		4,973.30
10 27	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	140.00	
10 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,606.60	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	150		AMERICAN TELEPHONE AND TELEGRAPH CO	43.6250	6,543.75
1	100		ANHEUSER BUSCH COS INC	56.7500	5,675.00
1	200		CLOROX COMPANY	43.7500	8,750.00
1	100		EASTMAN KODAK COMPANY	40.8750	4,087.50
1	500		GABELLI EQUITY TRUST INC	9.6250	4,812.50
1	300		GERMANY FUND INC F	11.2500	3,375.00
1	500		GREATER CHINA FUND INC F	13.3750	6,687.50
1	100		INTERNATIONAL BUSINESS MACHINE CORP	66.8750	6,687.50
1	600		JWP INC	3.8750	2,325.00
1	300		WACKENHUT CORPORATION	25.8750	7,762.50
1	500		ZWEIG FUND INC	12.5000	6,250.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		62,956.25

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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WITH JUST TWO MONTHS REMAINING BEFORE THE END OF THE YEAR, IT'S IMPORTANT TO THINK ABOUT PORTFOLIO AND PERSONAL EXPENSE ADJUSTMENTS TO HELP REDUCE INCOME TAXES. SEE CHUCK AULINO'S ARTICLE ON YEAR-END TAX STRATEGIES IN THE INVESTOR'S SPECTRUM ENCLOSED.

---END OF STATEMENT---

3-03-003 WWBLD 35.

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Wheat Butcher & Singer

[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8408 8539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A:DTD 12/10/82 216 1/2 MAIN ST

RICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$42,975.00		$67,179.56	$110,154.56

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	4,973.30CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	40,930.66	67,179.56
TOTAL MONEY MARKET		67,179.56

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	133.50CR	941.00CR
GSP DIVIDENDS CREDITED	87.12CR	2,183.69CR
AVERAGE YIELD ON MONEY MARKET 10/16/92 TO 11/16/92		2.39%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 02	1	DIVIDEND		AMERICAN TELEPHONE AND TELEGRAPH CO QUANTITY 150			49.50
11 02	1	SALE	200-	CLOROX COMPANY	44.5000		8,746.76
11 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	49.50	
11 04	1	SALE	100-	ANHEUSER BUSCH COS INC	57.2500		5,628.52
11 10	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	13,720.06	
11 11	1	SALE	150-	AMERICAN TELEPHONE AND TELEGRAPH CO	45.5000		6,679.70
11 13	1	DIVIDEND		CLOROX COMPANY QUANTITY 200			84.00
11 13	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,628.52	
11 17	1	DIVIDEND	87.12	REINVESTED DIVIDEND GSP			

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7-24-002 WWBLD

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **OUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				AS OF 11/16/92			
11 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	84.00	
11 19	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,679.70	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	100		EASTMAN KODAK COMPANY	41.8750	4,187.50
1	500		GABELLI EQUITY TRUST INC	10.2500	5,125.00
1	300		GERMANY FUND INC F	10.2500	3,075.00
1	500		GREATER CHINA FUND INC F	13.5000	6,750.00
1	100		INTERNATIONAL BUSINESS MACHINE CORP	68.2500	6,825.00
1	600		JWP INC	3.8750	2,325.00
1	300		WACKENHUT CORPORATION	27.5000	8,250.00
1	500		ZWEIG FUND INC	12.8750	6,437.50
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		42,975.00

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

NOW THAT THE NATIONAL ELECTIONS HAVE BEEN DECIDED, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? TO BE SURE, WHY NOT REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT? CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

7-92-2072 WWBLD

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$14,977.09	$26,449.34CR	$90,221.55	$131,647.98

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	26,449.34CR
NET CLOSING BALANCE		26,449.34CR

MONEY MARKET FUND($)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	67,179.56	90,221.55
TOTAL MONEY MARKET		90,221.55

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	308.00CR	1,249.00CR
GSP DIVIDENDS CREDITED	213.40CR	2,397.09CR
AVERAGE YIELD ON MONEY MARKET 11/17/92 TO 12/31/92		2.51%

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 08	1	PURCHASE	200	GERMANY FUND INC F	9.7500	2,028.84	
12 09	1	DIVIDEND		ANHEUSER BUSCH COS INC QUANTITY 100			32.00
12 10	1	DIVIDEND		INTERNATIONAL BUSINESS MACHINE CORP QUANTITY 100			121.00
12 10	1	SALE	300-	JWP INC	3.0000		850.47
12 14	1	SALE	100-	EASTMAN KODAK COMPANY	41.0000		4,003.04
12 14	1	SALE	300-	JWP INC	3.5000		980.93
12 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,875.84
12 17	1	PURCHASE	100	TIME WARNER INC PFD C. CONV EXCH NEW	48.6250	4,966.02	
12 22	1	SALE	3453.5-	COLONIAL TR II U S - GOVT FD CL A AS OF 12/21/92	6.8600		23,681.01
12 22	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,834.44	
12 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,966.02
12 28	1	DIVIDEND		GABELLI EQUITY TRUST INC QUANTITY 500			155.00
12 29	1	RECEIVED	3453.5	COLONIAL TR II U S -			

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L-01-002 WWBLD 5X

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-8950	55-6085192	GROWTH & INCOME (RETURN)	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* EDWARD GEORGE RAHALL TTEE FBO N JOE RAHALL II U/A DTD 12/10/82 216 1/2 MAIN ST

NICK RAHALL
343 CANNON BLDG
WASHINGTON DC 20515

STATEMENT PERIOD	PAGE
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SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 29	1	PURCHASE		GOVT FD CL A GSP-GOVT SEC PORTFOLIO	1.0000	155.00	
12 30	1	SALE	3857.047-	COLONIAL TR II U S - GOVT FD CL A AS OF 12/29/92	6.8600		26,449.34
12 30	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	23,681.01	
12 31	1	DIVIDEND	213.4	REINVESTED DIVIDEND GSP			

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1		3857.047	COLONIAL TR II U S - GOVT FD CL A	6.8700	26,497.91-
1	500		GABELLI EQUITY TRUST INC	10.2500	5,125.00
1	500		GERMANY FUND INC F	10.1250	5,062.50
1	500		GREATER CHINA FUND INC F	12.3750	6,187.50
1	100		INTERNATIONAL BUSINESS MACHINE CORP	50.3750	5,037.50
1	100		TIME WARNER INC PFD C CONV EXCH NEW	50.1250	5,012.50
1	300		WACKENHUT CORPORATION	28.5000	8,550.00
1	500		ZWEIG FUND INC	13.0000	6,500.00
1	167.5		RAHALL RLTY INC-INC UNDER WV LAWS CAP STK 175,000PAR VAL 100 PER S	N/A	
1	20		SCOTTSDALE LAND TRUST LIMITED PARTNERSHIP	N/A	
			VALUE OF PRICED SECURITIES		14,977.09

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WE APPRECIATE YOUR PATRONAGE THE PAST YEAR AND LOOK FORWARD TO SERVING YOU IN 1993. TO ENSURE THE ACCURACY OF OUR RECORDS AND THOSE REQUIRED BY THE IRS, PLEASE VERIFY THE TAX ID NUMBER ON THIS STATEMENT. IF INCORRECT, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

1-92-992 WWBLD 5

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

#4

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$102,300.70	$4,399.18DB	$276,074.09	$373,975.61

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	201.20CR
MARGIN ACCT - TYPE 2	18,690.09CR	4,600.38DB
NET CLOSING BALANCE		4,399.18DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	240,852.71	276,074.09
TOTAL MONEY MARKET		276,074.09

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	286.20CR	286.20CR
GSP DIVIDENDS CREDITED	386.12CR	386.12CR
AVERAGE YIELD ON MONEY MARKET	1/01/92 TO	1/15/92 3.81%
MARGIN INTEREST CHARGED	1.82DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 02	1	JOURNAL	20	GLAXO HOLDINGS PLC ADR F SPONSORED FR 65398600 A/O 12/31			
1 02	2	SALE	250-	SBARRO INC	39.5000		9,666.77
1 03	1	SALE	20-	GLAXO HOLDINGS PLC ADR F SPONSORED	32.0000		599.97
1 03	1	JOURNAL		TRF TO 65399300		2,000.00	
1 06	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	6,118.00	
1 06	1	JOURNAL		FR 6540-0000 M J & E G RAHALL			4,129.63
1 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	14,701.72	
1 07	2	DIVIDEND		BROWNING FERRIS INDS INC QUANTITY 500			85.00
1 07	2	PURCHASE	100	VALUE HEALTH INC	30.2500	3,105.85	

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1-01-004 WORLD 05

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[illegible] EAST [illegible] STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
1 03	2	SALE	5-	CALL BROWNING-FERRIS IND $20 EXP 02/22/92	3.6250		1,035.38
1 09	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	10,787.15	
1 09	2	SALE	200-	AMER CYANAMID CO	66.2500		13,074.83
1 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,000.00
1 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,000.00
1 13	1	CHECK ISSUED		CHECK ISSUED #13219843 MMKT WITHDRAWAL		1,000.00	
1 13	2	COVER SHORT	1	CALL AMER CYANAMID CO $65 EXP 02/22/92	2.0000	220.00	
1 13	2	PURCHASE	3	CALL S & P 100 INDEX $385 EXP 01/18/92	3.8750	1,212.53	
1 14	1	CHECK ISSUED		CHECK ISSUED #13219851 MMKT WITHDRAWAL		5,000.00	
1 14	2	COVER SHORT	1	CALL AMER CYANAMID CO $65 EXP 02/22/92	1.6875	168.75	
1 14	2	SALE	3-	CALL S & P 100 INDEX $385 EXP 01/18/92	5.2500		1,515.83
1 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,591.33
1 15	2	SALE	100-	VALUE HEALTH INC	31.8750		3,120.89
1 16	1	DIVIDEND	386.12	REINVESTED DIVIDEND GSP AS OF 1/15/92			
1 16	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	13,074.83	
1 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,120.89	
1 29	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,000.00
1 30	1	DIVIDEND		SUMMIT HLDG CORP QUANTITY 1006			201.20
1 30	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,624.00	
1 30	1	JOURNAL		TFR TO FUTURES		4,376.00	
1 30	2	MARGIN INT		INTEREST 12/27THRU 01/29		1.82	
1 31	2	PURCHASE	100	COMPRESSION LABS INC	26.8750	2,763.34	
1 31	2	PURCHASE	3	PUT S & P 100 INDEX $380 EXP 02/22/92	5.8750	1,835.22	
	1	NET JOURNALS		TRF TO CASH ACCT			42,481.66
	2	NET JOURNALS		TRF FRM MARGIN ACCT		42,481.66	

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1-88-004 WWBLD SEC.

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.6250	656.25
2	100		COMPRESSION LABS INC	26.8750	2,687.50
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
1	1006		SUMMIT HLDG CORP	16.2500	16,347.50
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2	3		PUT S & P 100 INDEX $380 EXP 02/22/92	5.7500	1,725.00
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	26.6080	13,304.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	57.8360	17,350.80
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.3990	6,089.65
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	93.5000	14,025.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	42.6120	12,783.60

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
1/01/92 THRU 1/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 2/18/92 @ 54.721	50.7200	12,680.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.8890	344.45
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.5710	4,306.95
			VALUE OF PRICED SECURITIES		102,300.70

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

STATEMENT OF INTEREST CHARGED
FOR PERIOD 12/27 THRU 1/29

DATE	NET BALANCE ALL MARGIN ACCTS	BALANCE IN CASH ACCOUNT	MARKET VALUE OF SHORTS	ADJUSTED DEBIT BALANCE	NUM DAYS	INTR RATE	INTEREST CHARGE
1 03	584.97CR	2,000.00	.00	1,415.03	3	8.000	.94
1 14	4,538.38	599.00CR	.00	3,939.38	1	8.000	.88
						TOTAL	1.82

TO INSURE ACCURACY FOR OUR RECORDS AND THOSE REQUIRED BY THE INTERNAL REVENUE SERVICE, PLEASE VERIFY THAT THE TAX ID NUMBER LISTED ON THIS STATEMENT IS CORRECT. SHOULD A DISCREPANCY EXIST, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

1-94-004 WWBLD 832

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$103,184.25	$2,935.08CR	$266,682.01	$372,801.34

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	201.20CR	.00
MARGIN ACCT - TYPE 2	6,600.38DB	2,935.08CR
NET CLOSING BALANCE		2,935.08CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	276,074.09	266,682.01
TOTAL MONEY MARKET		266,682.01

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	286.20CR
GSP DIVIDENDS CREDITED	933.21CR	1,319.33CR
AVERAGE YIELD ON MONEY MARKET	1/16/92 TO	2/18/92 3.62%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
2 03	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,635.84
2 04	2	SALE	3-	PUT S & P 100 INDEX $380 EXP 02/22/92	4.2500		1,226.61
2 07	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,536.73
2 10	2	PURCHASE	100	ALBERTSONS INC	42.5000	4,349.05	
2 18	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,349.05
2 19	1	DIVIDEND	933.21	REINVESTED DIVIDEND GSP AS OF 2/18/92			
2 21	2	SALE	5-	CALL S & P 100 INDEX $385 EXP 02/22/92	.8125		366.23
2 21	2	PURCHASE	5	CALL S & P 100 INDEX	2.1875	1,155.38	

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2-01-609 WWBLD :

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF*

NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV
25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$385 EXP 02/22/92			
2 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		789.15
2 24	2	PURCHASE	100	COMPRESSION LABS INC	22.6250	2,330.91	
2 27	2	SALE	200-	COMPRESSION LABS INC	27.0000		5,265.99
2 27	2	PURCHASE	3	CALL S & P 100 INDEX $385 EXP 03/21/92	6.5000	2,014.52	
2 28	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,014.52
	1	NET JOURNALS		TRF FRM CASH ACCT		10,526.49	
	2	NET JOURNALS		TRF TO MARGIN ACCT			10,526.49

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	100		ALBERTSONS INC	43.0000	4,300.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	1.5000	375.00
1	595		EOR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
1	1006		SUMMIT HLDG CORP	16.0000	16,096.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2	3		CALL S & P 100 INDEX $385 EXP 03/21/92	4.8750	1,462.50
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTO 6/01/83 CALL 4/01/93 @ 30.458	26.7910	13,395.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY=6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	58.4140	17,524.20

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3-42-003 WWBLD 3

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
2/01/92 THRU 2/29/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.5000	6,125.00
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	42.3630	12,708.90
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 3/20/92 @ 55.297	50.8300	12,707.50
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.9340	346.70
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.6510	4,342.95
			VALUE OF PRICED SECURITIES		103,184.25

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IF YOU ARE ROLLING OVER AN IRA OR HAVE CDS MATURING SOON, ASK YOUR FINANCIAL CONSULTANT FOR SUGGESTIONS ABOUT CONSERVATIVE ALTERNATIVE INVESTMENTS THAT MAY PAY CONSIDERABLY MORE THAN WHAT YOU ARE PRESENTLY RECEIVING.

2-09-003 WWBLD 27

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$143,640.70		$230,709.46	$374,350.16

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	2,935.08CR	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	266,682.01	230,709.46
TOTAL MONEY MARKET		230,709.46

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	286.20CR
OTHER INCOME CREDITED	289.00CR	289.00CR
GSP DIVIDENDS CREDITED	690.32CR	2,009.65CR
AVERAGE YIELD ON MONEY MARKET	2/19/92 TO	3/16/92 3.51%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
3 02	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,330.91
3 03	2	PURCHASE	100	PERRIGO COMPANY	29.7500	3,055.11	
3 05	1	JOURNAL	100	PERRIGO COMPANY			
3 05	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,265.99	
3 05	2	JOURNAL	100-	PERRIGO COMPANY			
3 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,025.00
3 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		30.11
3 11	1	LIQUIDATION		GULF BROADCAST CO LIQ QUANTITY 1700			289.00
3 13	1	SALE	500-	SUMMIT HLDG CORP	19.5000		9,527.63
3 13	1	PURCHASE	50000	WEST VIRGINIA HSG DEV	100.2980	50,152.50	

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7-04-004 WWBLD 107T

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
		ACCRUED INT		FUND SUBJ TO "AMT" HSG FINANCE REV SER 1991A CPN 6.150% DUE 5/01/96 DTD 6/01/91 FC 11/01/91		1,187.29	
3 16	1	SALE	106-	SUMMIT HLDG CORP	19.1250		1,949.99
3 17	1	DIVIDEND	690.32	REINVESTED DIVIDEND GSP AS OF 3/16/92			
3 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	289.00	
3 20	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		41,812.16
3 23	1	SALE	100-	PERRIGO COMPANY	31.0000		3,030.33
3 23	2	EXPIRED	3-	CALL S & P 100 INDEX $385 EXP 03/21/92 AS OF 3/21/92			
3 24	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	1,949.99	
3 31	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	3,030.33	
	1	NET JOURNALS		TRF FRM CASH ACCT		120.03	
	2	NET JOURNALS		TRF TO MARGIN ACCT			120.03

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	100		ALBERTSONS INC	43.5000	4,350.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	1.5000	375.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
1	400		SUMMIT HLDG CORP	20.0000	8,000.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
			FIXED INCOME SECURITIES		

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7-02-004 WWBLD 1071

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-70-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50000		ALABAMA SPL CARE FAC FIN ATN MONTGOMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.450	27.0160	13,508.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY=6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	58.3600	17,508.00
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.0870	5,630.45
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	41.3470	12,404.10
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 3/20/92 @ 55.297	50.8640	12,716.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY=11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.9310	346.55
1	50000		WEST VIRGINIA HSG DEV FUND SUBJ TO "AMT" HSG FINANCE REV SER 1991A CPN 6.150% DUE 5/01/96 DTD 6/01/91 FC 11/01/91	101.2500	50,625.00

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7-03-004 WWBLD 1078

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Wheat Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD C RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
3/01/92 THRU 3/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
i	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7280	4,377.60
			VALUE OF PRICED SECURITIES		143,640.70

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

INTRODUCING THE CAMBRIDGE FAMILY OF FUNDS, A FINANCIAL RESOURCE THAT YOU CAN USE THROUGHOUT YOUR LIFE TO PURSUE YOUR MAJOR FINANCIAL GOALS. SEE PAGE 3 OF THE ENCLOSED INVESTOR'S SPECTRUM, THEN CONTACT YOUR FINANCIAL CONSULTANT FOR FURTHER DETAILS.

---END OF STATEMENT---

7-04-004 WWBLD 107

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$147,766.50	$9,151.16DB	$224,552.09	$363,167.43

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	.00	80.00CR
MARGIN ACCT - TYPE 2	.00	9,231.16DB
NET CLOSING BALANCE		9,151.16DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	230,709.46	224,552.09
TOTAL MONEY MARKET		224,552.09

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	80.00CR	366.20CR
CORP INTEREST CREDITED	603.27CR	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	660.20CR	2,669.85CR
AVERAGE YIELD ON MONEY MARKET	3/17/92 TO	4/15/92 3.48%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 03	2	PURCHASE	250	SILICON GRAPHICS INC	19.8750	5,103.67	
4 07	2	PURCHASE	200	COASTAL HEALTHCARE GROUP INC	18.2500	3,756.87	
4 07	2	PURCHASE	100	SBARRO INC	40.6250	4,158.76	
4 08	2	PURCHASE	100	SBARRO INC	38.6250	3,955.79	
4 08	2	PURCHASE	150	SILICON GRAPHICS INC	17.6250	2,721.61	
4 09	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,966.00
4 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		137.67
4 10	2	SALE	200-	SBARRO INC	41.5000		8,141.64
4 14	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		7,915.63

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
4 14	2	SALE	200-	COASTAL HEALTHCARE GROUP INC	21.2500		4,134.22
4 15	1	INTEREST		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86 QUANTITY 15000			603.27
4 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,677.40
4 16	1	DIVIDEND	660.2	REINVESTED DIVIDEND GSP AS OF 4/15/92			
4 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	8,744.91	
4 27	2	PURCHASE	200	SBARRO INC	37.2500	7,597.10	
4 27	2	PURCHASE	100	SILICON GRAPHICS INC	15.8750	1,634.06	
4 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,134.22	
4 29	1	DIVIDEND		SUMMIT HLDG CORP QUANTITY 400			80.00
	1	NET JOURNALS		TRF FRM CASH ACCT		7,420.84	
	2	NET JOURNALS		TRF TO MARGIN ACCT			7,420.84

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	100		ALBERTSONS INC	41.5000	4,150.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	1.0000	250.00
1	595		ECR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	200		SBARRO INC	37.7500	7,550.00
2	500		SILICON GRAPHICS INC	16.7500	8,375.00
1	400		SUMMIT HLDG CORP	20.0000	8,000.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
			FIXED INCOME SECURITIES		

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.2150	13,607.50
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	58.8300	17,649.00
1	35000		OAK RIDGE TENN INOL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.0610	5,621.35
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	43.2190	12,965.70
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 5/25/92 @ 56.484	55.8790	13,969.75
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	6.9900	349.50
1	50000		WEST VIRGINIA HSG DEV FUND SUBJ TO "AMT" HSG FINANCE REV SER 1991A CPN 6.150% DUE 5/01/96 DTD 6/01/91 FC 11/01/91	101.7680	50,884.00

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN STREET BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
4/01/92 THRU 4/30/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
T	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.7660	4,394.70
			VALUE OF PRICED SECURITIES		147,766.50

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

HAVE YOU TAKEN ADVANTAGE OF THE RECENT ENHANCEMENTS TO THE CASH RESOURCES ACCOUNT? FOR MORE INFORMATION, PLEASE SEE THIS MONTH'S INVESTOR'S SPECTRUM. IF YOU DO NOT HAVE A CRA ACCOUNT, CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

5-04-004 WWBLD 36

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat Butcher & Singer

[illegible] EAST BYRD STREET, RICHMOND, VA [illegible]

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$118,403.30	8,224.50CR	$46,367.93	$172,995.73

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	.00	8,224.50CR
NET CLOSING BALANCE		8,224.50CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	56,892.89	46,367.93
TOTAL MONEY MARKET		46,367.93

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	476.76CR	991.28CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	243.78CR	3,555.71CR
AVERAGE YIELD ON MONEY MARKET	5/16/92 TO	6/15/92 3.14%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
6 02	2	PURCHASE	500	MAXUS ENERGY CORP	6.2500	3,230.55	
6 04	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			122.36
6 05	2	PURCHASE	200	QUALCOMM INC	20.5000	4,196.52	
6 05	2	PURCHASE	5	CALL S & P 100 INDEX $395 EXP 06/20/92	1.4375	776.82	
6 08	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		656.46
6 09	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,230.55
6 09	2	PURCHASE	10	CALL S & P 100 INDEX	1.0625	1,155.03	

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6-01-004 WWBLD 6'

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$395 EXP 06/20/92			
6 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,155.03
6 11	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			114.68
6 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,081.84
6 16	1	DIVIDEND	243.78	REINVESTED DIVIDEND GSP AS OF 6/15/92			
6 18	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			122.72
6 18	2	PURCHASE	100	QUALCOMM INC	18.2500	1,884.58	
6 22	2	EXPIRED	20-	CALL S & P 100 INDEX $395 EXP 06/20/92 AS OF 6/20/92			
6 23	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	122.72	
6 25	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			117.00
6 25	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,884.59
6 30	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	117.00	
6 30	2	SALE	200-	ALBERTSONS INC	41.8750		8,224.50
	1	NET JOURNALS		TRF FRM CASH ACCT		11,245.50	
	2	NET JOURNALS		TRF TO MARGIN ACCT			11,245.50

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.2500	562.50

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	500		MAXUS ENERGY CORP	6.0000	3,000.00
1	4		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL	N/A	
2	300		QUALCOMM INC	19.5000	5,850.00
2	700		SBARRO INC	23.7500	16,625.00
2	500		SILICON GRAPHICS INC	16.7500	8,375.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2		5	CALL SILICON GRAPHICS $20 EXP 07/18/92	.1250	62.50-
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.6320	13,816.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	59.5750	17,872.50
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.0920	5,982.20
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	44.9240	13,477.20

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
6/01/92 THRU 6/30/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 6/20/92 @ 56.948	57.0430	14,260.75
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 88A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.1270	356.35
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.9740	4,488.30
			VALUE OF PRICED SECURITIES		118,403.30

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

OUR CONSOLIDATED STATEMENT OF FINANCIAL CONDITION FOR THE FISCAL YEAR ENDED MARCH 31, 1992 IS ENCLOSED IN LIEU OF THE INVESTOR'S SPECTRUM. THE NEXT ISSUE OF THE INVESTOR'S SPECTRUM WILL BE IN THE JULY STATEMENTS, WHICH WILL BE MAILED EARLY IN AUGUST.

---END OF STATEMENT---

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
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MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$117,180.35		$56,892.89	$174,073.24

ACCOUNT BALANCE($)	OPENING BALANCE	CLOSING BALANCE
CASH ACCT - TYPE 1	80.00CR	.00
MARGIN ACCT - TYPE 2	9,231.16DB	.00
NET CLOSING BALANCE		.00

MONEY MARKET FUND($)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	224,552.09	56,892.89
TOTAL MONEY MARKET		56,892.89

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	148.32CR	514.52CR
MUNI INTEREST CREDITED	1,537.50CR	1,537.50CR
CORP INTEREST CREDITED	.00	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	642.08CR	3,311.93CR
AVERAGE YIELD ON MONEY MARKET	4/16/92 TO	5/15/92 3.27%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 01	1	INTEREST		WEST VIRGINIA HSG DEV FUND SUBJ TO "AMT" HSG FINANCE REV SER 1991A CPN 6.150% DUE 5/01/96 DTD 6/01/91 FC 11/01/91 QUANTITY 50000			1,537.50
5 01	1	REDEMPTION	50000-	WEST VIRGINIA HSG DEV FUND SUBJ TO "AMT" HSG FINANCE REV SER 1991A CPN 6.150% DUE 5/01/96 DTD 6/01/91 FC 11/01/91			
5 01	1	REDEMPTION		WEST VIRGINIA HSG DEV			50,000.00
5 04	1	SALE	400-	SUMMIT HLDG CORP	20.2500		8,100.00

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
5 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	42,386.34	
5 12	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	8,100.00	
5 12	2	PURCHASE	100	SBARRO INC	28.1250	2,873.42	
5 12	2	PURCHASE	100	SBARRO INC	32.3750	3,298.42	
5 13	2	PURCHASE	100	SBARRO INC	26.5000	2,713.99	
5 15	2	PURCHASE	100	ALBERTSONS INC	37.2500	3,816.25	
5 18	1	DIVIDEND	642.08	REINVESTED DIVIDEND GSP AS OF 5/15/92			
5 18	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,492.00
5 18	2	PURCHASE	4	PUT S & P 100 INDEX $390 EXP 06/20/92	6.2500	2,579.10	
5 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		7,258.94
5 19	2	SALE	2-	PUT S & P 100 INDEX $390 EXP 06/20/92	4.3750		834.97
5 20	1	PURCHASE	4	NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL	50.0000	200,000.00	
5 20	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,879.02
5 21	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		200,000.00
5 21	2	PURCHASE	200	SBARRO INC	23.2500	4,771.73	
5 21	2	SALE	2-	PUT S & P 100 INDEX $390 EXP 06/20/92	6.0000		1,155.68
5 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,660.57
5 22	2	SHORT SALE	5-	CALL SILICON GRAPHICS $20 EXP 07/18/92	.8125		360.67
5 26	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	360.67	
5 26	2	DIVIDEND		ALBERTSONS INC QUANTITY 100			16.00
5 28	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			132.32
5 28	2	PURCHASE	5	CALL S & P 100 INDEX $395 EXP 06/20/92	2.3125	1,234.35	
5 29	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,857.76
	1	NET JOURNALS		TRF FRM CASH ACCT		28,151.10	
	2	NET JOURNALS		TRF TO MARGIN ACCT			28,151.10

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BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		ALBERTSONS INC	39.1250	7,825.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	1.8750	468.75
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
1	4		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL	N/A	
2	700		SBARRO INC	22.6250	15,837.50
2	500		SILICON GRAPHICS INC	17.8750	8,937.50
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2		5	CALL SILICON GRAPHICS $20 EXP 07/18/92	.7500	375.00-
2	5		CALL S & P 100 INDEX $395 EXP 06/20/92	2.4375	1,218.75
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.4160	13,708.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY=6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	59.0630	17,718.90
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.0920	5,982.20
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00

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6-03-004 WWBLD 7

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
5/01/92 THRU 5/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	44.2880	13,286.40
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 6/20/92 @ 56.948	55.8790	13,969.75
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.0510	352.55
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	9.8890	4,450.05
			VALUE OF PRICED SECURITIES		117,180.35

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

SUMMERTIME IS ALWAYS A GOOD TIME TO TAKE A LOOK AT YOUR INVESTMENT PORTFOLIO TO BE SURE IT IS ON TARGET WITH YOUR CURRENT INVESTMENT OBJECTIVES. IF YOU WOULD LIKE TO REVIEW YOUR INVESTMENTS, PLEASE CALL YOUR FINANCIAL CONSULTANT FOR AN APPOINTMENT.

---END OF STATEMENT---

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MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$122,430.80	$2,366.77CR	$249,770.88	$374,568.45

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	8,224.50CR	2,366.77CR
NET CLOSING BALANCE		2,366.77CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	46,367.93	249,770.88
TOTAL MONEY MARKET		249,770.88

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	436.52CR	1,427.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	119.06CR	3,674.77CR
AVERAGE YIELD ON MONEY MARKET	6/16/92 TO	7/15/92 2.98%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 01	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			104.56
7 07	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	104.56	
7 07	2	PURCHASE	3	CALL S & P 100 INDEX $390 EXP 08/22/92	3.8750	1,215.66	
7 08	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,008.84	
7 09	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			142.48

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MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
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SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
7 09	2	SALE	3-	CALL S & P 100 INDEX $390 EXP 08/22/92	4.7500		1,368.00
7 14	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	1,510.48	
7 14	2	CHECK ISSUED		CHECK ISSUED #13220855 WITHDRAWAL		300.00	
7 15	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		300.00
7 16	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			91.68
7 16	1	DIVIDEND	119.06	REINVESTED DIVIDEND GSP AS OF 7/15/92			
7 20	2	SHORT SALE	5-	CALL SILICON GRAPHICS $20 EXP 08/22/92	.5625		241.24
7 20	2	EXPIRED	5	CALL SILICON GRAPHICS $20 EXP 07/18/92 AS OF 7/18/92			
7 21	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	332.92	
7 22	1	SALE	4-	NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL	50.0000		200,000.00
7 22	2	PURCHASE	150	IMCERA GROUP INC	35.5000	5,470.71	
7 23	1	DIVIDEND		NUVEEN INSURED QUALITY MONEY MKT PFD "W" 1SHR = 50,000 PRIN VAL QUANTITY 4			97.80
7 24	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	200,097.80	
7 29	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,470.71
7 29	2	SALE	500-	MAXUS ENERGY CORP	6.7500		3,266.18
7 31	2	PURCHASE	2	CALL S & P 100 INDEX $395 EXP 08/22/92	4.2500	899.41	
	1	NET JOURNALS		TRF TO CASH ACCT			2,847.37
	2	NET JOURNALS		TRF FRM MARGIN ACCT		2,847.37	

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3-92-004 WWBLD 34E

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 236 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
7/01/92 THRU 7/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.5000	625.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	150		IMCERA GROUP INC	35.5000	5,325.00
2	300		QUALCOMM INC	17.7500	5,325.00
2	700		SBARRO INC	21.3750	14,962.50
2	500		SILICON GRAPHICS INC	22.2500	11,125.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2		5	CALL SILICON GRAPHICS $20 EXP 08/22/92	2.5000	1,250.00-
2	2		CALL S & P 100 INDEX $395 EXP 08/22/92	4.2500	850.00
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.8500	13,925.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY=6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	60.1520	18,045.60
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	17.5250	6,133.75
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00

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3-08-604 WWBLD 342

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BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
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CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	47.1640	14,149.20
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 CALL 8/29/92 @ 58.248	57.6800	14,420.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.3570	367.85
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2820	4,626.90
			VALUE OF PRICED SECURITIES		122,430.80

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IF YOU HAD MUNICIPAL BONDS CALLED RECENTLY, OR EXPECT TO HAVE MUNICIPAL BONDS CALLED IN THE FUTURE, WE SUGGEST READING THE ARTICLE ON PAGE 3 OF INVESTOR'S SPECTRUM INCLUDED WITH THIS STATEMENT. FOR MORE INFORMATION, CALL YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

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MR NICK JOE RAHALL II
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BECKLEY WV 25801

STATEMENT PERIOD	PAGE
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ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$129,210.10	$5,761.51CR	$212,229.66	$347,201.27

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	2,366.77CR	5,761.51CR
NET CLOSING BALANCE		5,761.51CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	249,770.88	212,229.66
TOTAL MONEY MARKET		212,229.66

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	1,427.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	488.54CR	4,163.31CR
AVERAGE YIELD ON MONEY MARKET	7/16/92 TO	8/17/92 2.66%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 03	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		899.41
8 03	2	SALE	2-	CALL S & P 100 INDEX $395 EXP 08/22/92	4.1250		783.33
8 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	783.33	
8 06	2	PURCHASE	200	MIRAGE RESORTS INC	25.5000	5,229.70	
8 10	1	JOURNAL		TFR TO FUTURES		1,147.00	
8 11	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,119.18	
8 11	2	COVER SHORT	5	CALL SILICON GRAPHICS $20 EXP 08/22/92	1.6250	870.31	
8 11	2	SALE	4-	CALL S & P 100 INDEX $390 EXP 08/22/92	4.0000		1,537.70

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4-01-004 WWBLD

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STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
8 11	2	PURCHASE	4	CALL S & P 100 INDEX $390 EXP 08/22/92	3.2500	1,361.80	
8 12	1	TRANSFER A/C	700-	SBARRO INC			
8 12	1	TRANSFER A/C	500-	SILICON GRAPHICS INC			
8 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		694.41
8 12	2	PURCHASE	200	PROCTER & GAMBLE CO	47.6250	9,718.24	
8 12	2	PURCHASE	100	SCI-MED LIFE SYSTEMS INC	49.5000	5,053.52	
8 13	1	JOURNAL	700	SBARRO INC			
8 13	1	JOURNAL	500	SILICON GRAPHICS INC			
8 13	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,229.70
8 13	2	JOURNAL	700-	SBARRO INC			
8 13	2	JOURNAL	500-	SILICON GRAPHICS INC			
8 14	2	PURCHASE	300	SBARRO INC	21.6250	6,645.76	
8 14	2	PURCHASE	200	SYNTEX CORPORATION E	30.5000	6,244.06	
8 17	2	PURCHASE	200	SILICON GRAPHICS INC	22.1250	4,531.54	
8 18	1	DIVIDEND	488.54	REINVESTED DIVIDEND GSP AS OF 8/17/92			
8 19	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		14,771.76
8 21	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		12,869.82
8 24	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,531.54
8 26	2	SALE	100-	SCI-MED LIFE SYSTEMS INC	56.5000		5,546.48
8 28	2	PURCHASE	4	PUT S & P 100 INDEX $385 EXP 09/19/92	4.6250	1,915.63	
8 31	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,915.63
8 31	2	SALE	4-	PUT S & P 100 INDEX $385 EXP 09/19/92	4.0000		1,541.59
8 31	2	PURCHASE	3	PUT S & P 100 INDEX $385 EXP 09/19/92	4.2500	1,326.56	
	1	NET JOURNALS		TRF FRM CASH ACCT		36,882.76	
	2	NET JOURNALS		TRF TO MARGIN ACCT			36,882.76

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PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.5000	625.00
1	595		EQR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	150		IMCERA GROUP INC	36.1250	5,418.75
2	200		MIRAGE RESORTS INC	25.2500	5,050.00
2	200		PROCTER & GAMBLE CO	46.8750	9,375.00
2	300		QUALCOMM INC	15.3750	4,612.50
2	300		SBARRO INC	25.2500	7,575.00
2	200		SILICON GRAPHICS INC	21.5000	4,300.00
2	200		SYNTEX CORPORATION E	28.7500	5,750.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2	3		PUT S & P 100 INDEX $385 EXP 09/19/92	4.2500	1,275.00
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	28.0625	14,031.25
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	60.7640	18,229.20
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	16.9000	5,915.00
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	92.0000	13,800.00

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4-03-004 WWBLD 2

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
8/01/92 THRU 8/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	45.8490	13,754.70
1	25000		THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 DTD 6/01/82 PRE 9/01/92 @ 58.012	58.0120	14,503.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.3490	367.45
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2850	4,628.25
			VALUE OF PRICED SECURITIES		129,210.10

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WHY NOT USE OUR ANALYST ACTION LIST IN MANAGING YOUR INVESTMENT PORTFOLIO? THIS COMPILATION OF OUR RESEARCH ANALYSTS' CURRENT RECOMMENDATIONS HAS AN ATTRACTIVE GROWTH HISTORY. ASK YOUR FINANCIAL CONSULTANT FOR YOUR FREE COPY.

---END OF STATEMENT---

4-04-094 WWSLD

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$124,747.05	$7,543.03DB	$213,889.14	$331,093.16

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	5,761.51CR	7,543.03DB
NET CLOSING BALANCE		7,543.03DB

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	212,229.66	213,889.14
TOTAL MONEY MARKET		213,889.14

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	15.00CR	1,442.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	603.27CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	456.25CR	4,619.56CR
AVERAGE YIELD ON MONEY MARKET	8/18/92 TO	9/15/92 2.57%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 01	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	215.03	
9 01	2	SALE	300-	SBARRO INC	25.3750		7,446.55
9 02	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,546.48	
9 02	2	PURCHASE	200	ARTISOFT INC	12.2500	2,538.94	
9 02	2	PURCHASE	200	PSICOR INC	12.0000	2,487.93	
9 02	2	PURCHASE	200	ROTECH MEDICAL CORP	12.5000	2,589.79	
9 03	1	PURCHASE	100	ROTECH MEDICAL CORP	11.7500	1,221.45	
9 03	1	REDEMPTION	25000-	THIRD COLUMBUS HSG DEV CORP GA MTG REV 12.125% DIS MAT PMT CPN 0.000% DUE 9/01/97 OTD 6/01/82 PRE 9/01/92 @ 58.012			

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2-91-065 WWBLD 10'

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-76-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
9 03	1	REDEMPTION		THIRD COLUMBUS DUE 9-1-97 CALL 9-1-92			14,502.70
9 03	2	PURCHASE	100	ARTISOFT INC	13.0000	1,348.97	
9 03	2	SALE	1-	PUT S & P 100 INDEX $385 EXP 09/19/92	2.0000		199.99
9 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	14,702.69	
9 08	2	SALE	2-	PUT S & P 100 INDEX $385 EXP 09/19/92	3.3750		634.97
9 10	2	SALE	300-	ARTISOFT INC	15.5000		4,519.91
9 10	2	PURCHASE	200	INTERNATIONAL SPECIALTY PRODUCTS INC	13.1250	2,716.64	
9 11	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,105.56
9 14	1	JOURNAL	100-	ROTECH MEDICAL CORP			
9 14	2	JOURNAL	100	ROTECH MEDICAL CORP			
9 15	1	PURCHASE	200	IDB COMMUNICATIONS GROUP INC	15.8750	3,274.81	
9 15	2	PURCHASE	100	NELLCOR INCORPORATED	30.5000	3,131.22	
9 15	2	SALE	4-	CALL S & P 100 INDEX $390 EXP 09/19/92	2.6250		995.19
9 15	2	PURCHASE	4	CALL S & P 100 INDEX $390 EXP 09/19/92	2.8125	1,180.79	
9 16	1	DIVIDEND	456.25	REINVESTED DIVIDEND GSP AS OF 9/15/92			
9 16	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		185 60
9 16	2	PURCHASE	100	IDB COMMUNICATIONS GROUP INC	15.5000	1,604.02	
9 16	2	PURCHASE	100	PSICOR INC	12.7500	1,323.47	
9 16	2	PURCHASE	200	ROTECH MEDICAL CORP	11.2500	2,334.90	
9 21	2	PURCHASE	4	CALL S & P 100 INDEX $390 EXP 10/17/92	5.7500	2,371.74	
9 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		6,974.50
9 22	2	SALE	200-	MIRAGE RESORTS INC	27.6250		5,416.17
9 23	1	DELIVERED	200-	IDB COMMUNICATIONS GROUP INC TO 6539-9650-2 NICK JOE RAHALL II			
9 23	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,262.39
9 23	2	PURCHASE	250	ARTISOFT INC	13.7500	3,559.79	
9 23	2	RECEIVED	200	IDB COMMUNICATIONS GROUP INC			

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BKD8 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	3

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				FROM 6539-9650 NICK JOE RAHALL II			
9 23	2	PURCHASE	200	MIRAGE RESORTS INC	26.2500	5,368.67	
9 25	2	PURCHASE	250	ARTISOFT INC	12.2500	3,166.55	
9 25	2	PURCHASE	100	SILICON GRAPHICS INC	18.0000	1,859.07	
9 25	2	PURCHASE	6	CALL S & P 100 INDEX $390 EXP 10/17/92	1.9375	1,235.63	
9 28	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,235.63
9 29	2	DIVIDEND		IMCERA GROUP INC QUANTITY 150			15.00
9 29	2	PURCHASE	200	PSICOR INC	11.6250	2,411.41	
9 30	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		3,497.29
9 30	2	JOURNAL		TO FUTURES		106.00	
	1	NET JOURNALS		TRF FRM CASH ACCT		8,803.21	
	2	NET JOURNALS		TRF TO MARGIN ACCT			8,803.21

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	500		ARTISOFT INC	12.6250	6,312.50
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.1250	531.25
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	300		IDB COMMUNICATIONS GROUP INC	17.2500	5,175.00
2	150		IMCERA GROUP INC	35.7500	5,362.50
2	200		INTERNATIONAL SPECIALTY PRODUCTS INC	13.7500	2,750.00
2	200		MIRAGE RESORTS INC	26.3750	5,275.00
2	100		NELLCOR INCORPORATED	31.0000	3,100.00
2	200		PROCTER & GAMBLE CO	49.3750	9,875.00
2	500		PSICOR INC	10.5000	5,250.00
2	300		QUALCOMM INC	18.0000	5,400.00
2	500		ROTECH MEDICAL CORP	10.7500	5,375.00
2	300		SILICON GRAPHICS INC	18.7500	5,625.00
2	200		SYNTEX CORPORATION E	27.0000	5,400.00

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2-49-668 WWBLD 10

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF*

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

NICK JOE RAHALL II
216 MAIN ST
BECKLEY WV
25801-4613

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
2	10		CALL S & P 100 INDEX $390 EXP 10/17/92	2.1250	2,125.00
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MONTGOMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.6520	13,826.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	60.7880	18,236.40
1	35000		OAK RIDGE TENN INDL DEV BRO MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.2600	6,391.00
1	15000		SHONEYS INNS CRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	46.1280	13,838.40
1	5000		WASHINGTON ST HSG FIN COMM SGLE. FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.4130	370.65
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.0630	4,528.35

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2-06-095 WWSLD 101

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
9/01/92 THRU 9/30/92	5

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE

VALUE OF PRICED SECURITIES 124,747.05

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

IF THE YIELD ON YOUR CDS IS DISAPPOINTING, WHY NOT CALL YOUR FINANCIAL CONSULTANT FOR A COPY OF OUR NEW BOOKLET "SIX WAYS TO EARN SIX PERCENT OR MORE?" IT CARRIES A WEALTH OF INFORMATION FOR CONSERVATIVE INVESTORS. SEE LEAFLET ENCLOSED.

---END OF STATEMENT---

2-05-005 WWBLD 101

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STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$106,135.65	$25,218.93CR	$198,788.66	$330,143.24

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	7,543.03DB	25,218.93CR
NET CLOSING BALANCE		25,218.93CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	213,889.14	198,788.66
TOTAL MONEY MARKET		198,788.66

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	1,442.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	684.38CR	1,287.65CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	421.18CR	5,040.74CR
AVERAGE YIELD ON MONEY MARKET	9/16/92 TO 10/15/92	2.42%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 01	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		106.00
10 02	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		5,025.62
10 02	2	PURCHASE	500	PSICOR INC	10.5000	5,391.98	
10 02	2	PURCHASE	300	ROTECH MEDICAL CORP	10.7500	3,306.00	
10 02	2	PURCHASE	200	ROTECH MEDICAL CORP	10.5000	2,154.00	
10 06	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,411.41
10 06	1	JOURNAL		TFR TO FUTURES		2,213.00	
10 07	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,213.00
10 08	2	PURCHASE	200	SPACELABS MEDICAL INC	21.7500	4,467.27	
10 09	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		10,851.98

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2-01-004 WWBLD 6

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
10 09	2	SALE	5-	CALL S & P 100 INDEX $370 EXP 10/17/92	3.1250		1,498.70
10 09	2	PURCHASE	5	CALL S & P 100 INDEX $370 EXP 10/17/92	4.5000	2,327.32	
10 12	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		828.62
10 13	2	PURCHASE	50	IMCERA GROUP INC	32.5000	1,680.54	
10 13	2	SALE	200-	PROCTER & GAMBLE CO	49.8750		9,804.91
10 13	2	PURCHASE	300	SYMBOL TECHNOLOGIES INC	11.0000	3,410.04	
10 16	1	INTEREST		SHONEYS INNS CRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86 QUANTITY 15000			684.38
10 16	1	DIVIDEND	421.16	REINVESTED DIVIDEND GSP AS OF 10/15/92			
10 16	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,467.27
10 16	2	SALE	300-	QUALCOMM INC	22.0000		6,472.10
10 19	2	EXPIRED	10-	CALL S & P 100 INDEX $390 EXP 10/17/92 AS OF 10/17/92			
10 20	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,398.71	
10 21	1	JOURNAL		TFR TO FUTURES		1,250.00	
10 21	2	SHORT SALE	3-	CALL SILICON GRAPHICS $22.50 EXP 11/21/92	1.1250		288.93
10 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		961.07
10 22	2	SALE	300-	SILICON GRAPHICS INC	23.3750		6,876.31
10 22	2	COVER SHORT	3	CALL SILICON GRAPHICS $22.50 EXP 11/21/92	1.6250	527.50	
10 23	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,944.60	
10 23	2	PURCHASE	100	ANDREW CORPORATION	37.2500	3,807.12	
10 23	2	PURCHASE	200	VERTEX COMMUNICATNS CORP	11.2500	2,334.90	
10 27	2	SALE	500-	ARTISOFT INC	14.7500		7,205.56
10 28	2	SALE	200-	SPACELABS MEDICAL INC	26.0000		5,068.87
10 29	2	SALE	1000-	PSICOR INC	12.5000		12,210.21
	1	NET JOURNALS		TRF FRM CASH ACCT		12,743.04	
	2	NET JOURNALS		TRF TO MARGIN ACCT			12,743.04

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-6645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	100		ANDREW CORPORATION	37.0000	3,700.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.1250	531.25
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
2	300		IOB COMMUNICATIONS GROUP INC	15.7500	4,725.00
2	200		IMCERA GROUP INC	35.6250	7,125.00
2	200		INTERNATIONAL SPECIALTY PRODUCTS INC	11.0000	2,200.00
2	200		MIRAGE RESORTS INC	27.7500	5,550.00
2	100		NELLCOR INCORPORATED	30.2500	3,025.00
2	1000		ROTECH MEDICAL CORP	11.5000	11,500.00
2	300		SYMBOL TECHNOLOGIES INC	11.0000	3,300.00
2	200		SYNTEX CORPORATION E	25.0000	5,000.00
2	200		VERTEX COMMUNICATNS CORP	11.2500	2,250.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	27.8720	13,936.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 8BA OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	61.5650	18,469.50
1	35000		OAK RIDGE TENN INDL DEV BRO MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.4420	6,454.70

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
8K08 6539-9650	236-76-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
10/01/92 THRU 10/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	15000		SHONEYS INNS ORP IV INC RV APPREC &PRIN REPAY 9% 1ST YR NO$CRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	N/A	
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 9/01/82	44.7590	13,427.70
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.4890	$74.45
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.1490	4,567.05
			VALUE OF PRICED SECURITIES		106,135.65

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

WITH JUST TWO MONTHS REMAINING BEFORE THE END OF THE YEAR, IT'S IMPORTANT TO THINK ABOUT PORTFOLIO AND PERSONAL EXPENSE ADJUSTMENTS TO HELP REDUCE INCOME TAXES. SEE CHUCK AULINO'S ARTICLE ON YEAR-END TAX STRATEGIES IN THE INVESTOR'S SPECTRUM ENCLOSED.

---END OF STATEMENT---

2-04-094 WWBLD 6

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1011 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$86,492.30	$5,237.38CR	$257,199.85	$348,929.53

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	25,218.93CR	5,237.38CR
NET CLOSING BALANCE		5,237.38CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	198,788.66	257,199.85
TOTAL MONEY MARKET		257,199.85

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	.00	1,442.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	1,287.65CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	444.02CR	5,484.76CR
AVERAGE YIELD ON MONEY MARKET 10/16/92 TO 11/16/92		2.39%
MARGIN INTEREST CHARGED	.00DB	1.82DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
11 02	2	SALE	200-	MIRAGE RESORTS INC	27.8750		5,458.77
11 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,939.85	
11 04	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,068.87	
11 04	2	SALE	200-	IMCERA GROUP INC	36.6250		7,187.35
11 05	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	12,210.21	
11 05	2	SALE	1000-	ROTECH MEDICAL CORP	12.8750		12,580.11
11 06	2	SALE	300-	SYMBOL TECHNOLOGIES INC	13.3750		3,891.74
11 06	2	PURCHASE	100	VERTEX COMMUNICATNS CORP	12.0000	1,246.95	
11 09	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,458.77	
11 09	2	PURCHASE	10	CALL EQUIFAX INC	1.0000	1,097.41	

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3-01-004 WWBLD

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MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$17.50 EXP 01/16/93			
11 10	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,097.41
11 10	2	STOCK DIV	15	IDB COMMUNICATIONS GROUP INC			
11 11	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	7,187.35	
11 11	2	SALE	100-	ANDREW CORPORATION	41.5000		4,062.19
11 11	2	SALE	100-	MELLCOR INC	33.2500		3,248.22
11 11	2	PURCHASE	200	SPACELABS MEDICAL INC	24.2500	4,974.70	
11 12	2	SALE	200-	INTERNATIONAL SPECIALTY PRODUCTS INC	11.2500		2,182.00
11 13	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	12,580.11	
11 17	1	DIVIDEND	444.02	REINVESTED DIVIDEND GSP AS OF 11/16/92			
11 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	2,644.79	
11 20	2	SALE	10-	CALL EQUIFAX INC $17.50 EXP 01/16/93	1.5625		1,456.92
11 23	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,974.63	
11 24	2	PURCHASE	200	INTERACTIVE NETWORK INC	9.1250	1,893.68	
11 24	2	SALE	200-	SPACELABS MEDICAL INC	28.5000		5,561.69
11 25	2	SALE	315-	IDB COMMUNICATIONS GROUP INC	19.0000		5,816.66
11 27	2	PURCHASE	300	TELXON CORP	13.7500	4,247.29	
	1	NET JOURNALS		TRF TO CASH ACCT			57,967.17
	2	NET JOURNALS		TRF FRM MARGIN ACCT		57,967.17	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
1	250		CHAMPIONS SPORTS INC PAR $0.001	2.0000	500.00
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	

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3-02-004 WWBLD

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901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
2	200		INTERACTIVE NETWORK INC	10.0000	2,000.00
2	200		SYNTEX CORPORATION E	22.1250	4,425.00
2	300		TELXON CORP	13.5000	4,050.00
2	300		VERTEX COMMUNICATNS CORP	11.7500	3,525.00
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	28.0940	14,047.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	61.8680	18,560.40
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.3110	6,408.85
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	93.0000	13,950.00
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	46.8200	14,046.00
1	5000		WASHINGTON ST HSG FIN COMM SGLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84	7.4680	373.40

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3-03-004 WWSLD

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1001 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BKOB 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD O RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
11/01/92 THRU 11/30/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	45000		WEST VIRGINIA BT HOUSING DEV FUND SGLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.2370	4,606.65
			VALUE OF PRICED SECURITIES		86,492.30

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

NOW THAT THE NATIONAL ELECTIONS HAVE BEEN DECIDED, ARE YOUR INVESTMENTS POSITIONED FOR DEVELOPING MARKET OPPORTUNITIES? TO BE SURE, WHY NOT REVIEW YOUR PORTFOLIO WITH YOUR FINANCIAL CONSULTANT? CALL TODAY TO SET UP AN APPOINTMENT.

---END OF STATEMENT---

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MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	1

ACCOUNT SUMMARY

VALUE OF PRICED SECURITIES	NET CLOSING BALANCE	TOTAL MONEY MARKET	TOTAL ACCOUNT VALUE
$76,244.38	$281.03CR	$273,492.83	$350,018.24

ACCOUNT BALANCE(S)	OPENING BALANCE	CLOSING BALANCE
MARGIN ACCT - TYPE 2	5,237.38CR	281.03CR
NET CLOSING BALANCE		281.03CR

MONEY MARKET FUND(S)	OPENING BALANCE	CLOSING BALANCE
GSP GOVT SEC PORTFOLIO	257,199.85	273,492.83
TOTAL MONEY MARKET		273,492.83

INCOME AND EXPENSE	CURRENT PERIOD	YEAR TO DATE
CASH DIVIDENDS CREDITED	52.00CR	1,494.80CR
MUNI INTEREST CREDITED	.00	1,537.50CR
CORP INTEREST CREDITED	.00	1,287.65CR
OTHER INCOME CREDITED	.00	289.00CR
GSP DIVIDENDS CREDITED	825.10CR	6,309.86CR
AVERAGE YIELD ON MONEY MARKET 11/17/92 TO 12/31/92		2.51%
MARGIN INTEREST CHARGED	.46DB	2.28DB

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
12 03	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	5,237.38	
12 03	2	PURCHASE	100	INTERACTIVE NETWORK INC	10.2500	1,068.42	
12 03	2	SALE	300-	TELXON CORP	15.5000		4,532.92
12 04	1	PURCHASE	10	PUT S & P 100 INDEX $390 EXP 12/19/92	2.0000	2,111.83	
12 07	1	SALE	5-	PUT S & P 100 INDEX $390 EXP 12/19/92	1.1875		540.26
12 07	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,111.83
12 07	1	JOURNAL		TFR TO FUTURES		1,722.00	
12 07	2	DIVIDEND		SYNTEX CORPORATION E QUANTITY 200			52.00
12 09	1	SALE		GSP-GOVT SEC PORTFOLIO AS OF 12/07/92	1.0000		1,722.00
12 10	2	SALE	300-	INTERACTIVE NETWORK INC	13.8750		4,054.39
12 10	2	SALE	300-	VERTEX COMMUNICATNS CORP	14.0000		4,095.10
12 15	1	SALE	5-	PUT S & P 100 INDEX	.5625		281.24

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ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	2

SECURITIES ACCOUNT ACTIVITY THIS PERIOD

DATE	TYPE	TRANSACTION	QUANTITY	DESCRIPTION	PRICE	DEBIT	CREDIT
				$390 EXP 12/19/92			
12 15	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	4,056.76	
12 15	2	PURCHASE	200	INTERACTIVE NETWORK INC	11.8750	2,462.42	
12 16	2	PURCHASE	100	INTERACTIVE NETWORK INC	10.3750	1,081.17	
12 17	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	8,430.73	
12 18	2	SALE	200-	SYNTEX CORPORATION E	23.6250		4,620.43
12 21	2	SALE	300-	INTERACTIVE NETWORK INC	13.6250		3,965.76
12 22	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		2,462.42
12 23	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		1,081.17
12 24	1	EXCHANGE	5000-	WASHINGTON ST MSG FIN COMM SOLE FAM MTG REV SER 84A OY-11.625% CPN 0.000% DUE 1/01/16 DTD 11/15/84			
12 24	1	EXCHANGE	5000	WASHINGTON ST MSG FINXXX SUBMITTED PARTIAL CALL SER 84A OY-11.625% CPN 0.000% DUE 1/01/93 DTD 11/15/84			
12 24	1	DEPOSIT		FUNDS RECD			5,000.00
12 28	1	PURCHASE		GSP-GOVT SEC PORTFOLIO	1.0000	9,620.43	
12 28	1	SALE		GSP-GOVT SEC PORTFOLIO	1.0000		4,500.00
12 29	1	CHECK ISSUED		CHECK ISSUED #13221780 MMKT WITHDRAWAL		4,500.00	
12 30	2	MARGIN INT		INTEREST 11/25THRU 12/29		.46	
12 31	1	DIVIDEND	825.1	REINVESTED DIVIDEND GSP			
12 31	2	PURCHASE	200	ADVANCED TECHNOLOGY LABS INC	17.5000	3,594.18	
12 31	2	SALE	6-	PUT S & P 100 INDEX $400 EXP 01/16/93	3.3750		1,944.40
12 31	2	PURCHASE	6	PUT S & P 100 INDEX $400 EXP 01/16/93	3.2500	2,034.49	
	1	NET JOURNALS		TRF TO CASH ACCT			17,980.21
	2	NET JOURNALS		TRF FRM MARGIN ACCT		17,980.21	

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
			EQUITIES AND OPTIONS		
2	200		ADVANCED TECHNOLOGY LABS INC	17.5000	3,500.00
1	250		CHAMPIONS SPORTS INC PAR $0.001	.8125	203.13

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3-02-004 WWBLD 17!

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

BUTCHER & SINGER IS A DIVISION OF WHEAT, FIRST SECURITIES, INC., MEMBER NEW YORK STOCK EXCHANGE AND SIPC

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BR08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	3

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	595		EGR IND INC-INC UNDER THE LAWS OF THE STATE OF WEST VIRGINIA	N/A	
1	1700		GULF BROADCAST CO LIQ	N/A	
1	15		QUALIFIED HSG PARTNERS LIMITED PARTNERSHIP	N/A	
			FIXED INCOME SECURITIES		
1	50000		ALABAMA SPL CARE FAC FIN ATH MNTGMERY MTG REV FHA NO PERIODIC INT OY=9.75% CPN 0.000% DUE 4/01/06 DTD 6/01/83 CALL 4/01/93 @ 30.458	28.3820	14,191.00
1	30000		NC EDUC FACS FIN AGY DUKE UNIV PROJ REV 88A OY-6.9% NO PER INTEREST CPN 0.000% DUE 10/01/00 DTD 3/02/88 CALL 10/01/98 @ 91.677	61.9710	18,591.30
1	35000		OAK RIDGE TENN INDL DEV BRD MTG REV FHA INSRD BRITISH WOODS APT OY=10% CPN 0.000% DUE 6/01/25 DTD 6/26/85 FC 12/01/10 CALL 6/01/00 @ 38.818	18.5000	6,475.00
1	15000		SHONEYS INNS GRP IV INC RV APPREC &PRIN REPAY 9% 1ST YR 40%GRS RV 4/15/87 CPN 0.000% DUE 4/15/01 DTD 4/15/86 FC 10/15/86	93.2500	13,987.50
1	30000		TAMPA FLA WTR & SWR REV CPN 0.000% DUE 10/01/05 DTD 5/01/82	47.2340	14,170.20
1	5000		WASHINGTON ST HSG FINXXX SUBMITTED PARTIAL CALL SER 84A OY-11.625% CPN 0.000% DUE 1/01/93 DTD 11/15/84	7.6020	380.10

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3-00-004 WWBLD 17

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

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Wheat First Securities | Butcher & Singer

901 EAST BYRD STREET, RICHMOND, VA 23219

STATEMENT

ACCOUNT NUMBER	TAX I.D. NUMBER	INVESTMENT OBJECTIVE	YOUR FINANCIAL CONSULTANT
BK08 6539-9650	236-78-8645	TRADING & SPECULATION	EDWARD G RAHALL **DUPLICATE FOR THE ACCOUNT OF* NICK JOE RAHALL II 216 MAIN ST BECKLEY WV 25801-4613

MR NICK JOE RAHALL II
110 1/2 MAIN ST
BECKLEY WV 25801

STATEMENT PERIOD	PAGE
12/01/92 THRU 12/31/92	4

CURRENT PORTFOLIO

TYPE	LONG	SHORT	DESCRIPTION	PRICE	VALUE
1	45000		WEST VIRGINIA ST HOUSING DEV FUND SOLE FAM MTG REV OY-11.00% EX-CALL CPN 0.000% DUE 1/01/15 DTD 9/28/83	10.5470	4,746.15
			VALUE OF PRICED SECURITIES		76,244.38

N/A - MONTH END PRICE NOT AVAILABLE THROUGH OUR REGULAR PRICING SERVICES - A CURRENT PRICE IS AVAILABLE UPON REQUEST.

STATEMENT OF INTEREST CHARGED
FOR PERIOD 11/25 THRU 12/29

DATE	NET BALANCE ALL MARGIN ACCTS	BALANCE IN CASH ACCOUNT	MARKET VALUE OF SHORTS	ADJUSTED DEBIT BALANCE	NUM DAYS	INTR RATE	INTEREST CHARGE
12 07	52.00CR	1,722.00	.00	1,670.00	1	7.500	.35
12 08	52.00CR	592.00	.00	540.00	1	7.500	.11
						TOTAL	.46

WE APPRECIATE YOUR PATRONAGE THE PAST YEAR AND LOOK FORWARD TO SERVING YOU IN 1993. TO ENSURE THE ACCURACY OF OUR RECORDS AND THOSE REQUIRED BY THE IRS, PLEASE VERIFY THE TAX ID NUMBER ON THIS STATEMENT. IF INCORRECT, PLEASE CONTACT YOUR FINANCIAL CONSULTANT.

---END OF STATEMENT---

PRICES MAY DIFFER FROM CURRENT MARKET QUOTES. COMPUTERIZED PRICING SERVICES ARE OFTEN UNABLE TO SUPPLY UP TO THE MINUTE INFORMATION. PRICES ARE PROVIDED ONLY AS A GENERAL GUIDE TO PORTFOLIO VALUE.

BUTCHER & SINGER IS A DIVISION OF WHEAT, FIRST SECURITIES, INC., MEMBER NEW YORK STOCK EXCHANGE AND SIPC

FOR IMPORTANT ADDITIONAL INFORMATION, PLEASE SEE REVERSE SIDE

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Plus Statement

1992

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks		$ 368,641.50
Mutual funds		19,310.00
Margin account balance		-123,522.87
Other investments		29,868.30
Net value this period		$ 294,296.93
Net value last period	$ 308,633.43	

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 154.00	$ 154.00	$ 0.00
Total	$ 154.00	$ 154.00	$ 0.00

Gain/loss summary

	This period	This year
Realized gain or (loss) - 1991	($ 3,180.74)	Not applicable
Realized gain or (loss)	9,095.70	9,095.70
Unrealized gain or (loss)	237,875.86	Not applicable

Bulletin board

What's Ahead For 1992? We believe that a "new economic order" will present unique challenges and opportunities to investors. As 1992 unfolds, will interest rates continue to fall? Will stock prices continue to rise? Ask your Financial Consultant for a copy of our new report, "Investing In The '90s: A New Economic Order 1992."

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Consolidated Client Trust Statement

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -135,156.67
Securities bought and other subtractions		-25,749.23	
Securities sold and other additions	37,704.72		
Interest charged on loans		-475.69	
Dividends credited	154.00		
Total	$ 37,858.72	$ -26,224.92	
Closing cash balance			$ -123,522.87

Margin account balance -123,522.87

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/31/92.

Stocks

Common stocks

Description	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 37.25	3.543%	$ 396.00	$ 11,175.00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	70.50			223,485.00	Symbol: AMGN
CYTOGEN CORP	OTC	1,000	23.75			23,750.00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	30.75	1.83	450.40	24,600.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	28.375	2.819	400.00	14,187.50	Symbol: GAP\Rated: B+
ICN PHARMACEUTICALS INC	NYSE	500	23.625			11,812.50	Symbol: ICN\Rated: C
LIN BROADCASTING CORP	OTC	158	74.50			11,771.00	Symbol: LINB\Rated: B
MCI COMMUNICATIONS CORP	OTC	500	31.375	.318	50.00	15,687.50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	31.375			2,635.50	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	60.625	2.177	264.00	12,125.00	Symbol: SGP\Rated: A-
SYNTEX CORP	NYSE	100	48.25	1.906	92.00	4,825.00	Symbol: SYN\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Account number 685-03367-17 240

Stocks
continued

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
TEXAS INSTRUMENTS INC	NYSE	300	$ 35.75	2.013%	$ 219.00	$ 10,725.00	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	41.25	3.298	68.00	2,062.50	Symbol: UPJ\Rated: A
Total value of stocks					**$ 1,936.40**	**$ 368,841.50**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 19.31	$ 19,310.00	In cash account
Total value of mutual funds			**$ 19,310.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,345.60	$ 13,456.00	In cash account
S L FUTURES 1000 PLUS L P	15	1,080.82	16,212.30	In cash account
Total value of other investments			**$ 29,668.30**	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
01/07/92	Sold	AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM FOR TAX PURPOSES, THIS TRANSACTION IS REPORTABLE IN 1991	-400	$ 20.75	$ 8,152.30
01/07/92	Sold	UNION CARBIDE CORP FOR TAX PURPOSES, THIS TRANSACTION IS REPORTABLE IN 1991	-200	20.50	4,013.96
01/09/92	Bought	ICN PHARMACEUTICALS INC	300	19.625	-6,000.75
01/22/92	Bought	CYTOGEN CORP	500	30.00	-15,000.00
01/27/92	Bought	ICN PHARMACEUTICALS INC	200	23.25	-4,746.46
01/28/92	Sold	WALT DISNEY COMPANY	-200	128.50	25,536.46
Total securities bought and other subtractions					**$ -26,749.23**
Total securities sold and other additions					**$ 37,704.72**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Business Client FMA Statement

Account number 685-03367-17 240

Interest charged on loans

Date	Description	Amount
01/21/92	INTEREST CHARGED FOR 21 DAY(S) FROM 12/31 THRU 1/20 @ 8 1/4% CLOSING BALANCE 129,891 AVERAGE BALANCE 130,474	$ 475.69

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/27/92	TEXAS INSTRUMENTS INC CASH DIV ON 300 SHS RECORD 12/30/91 PAY 01/27/92	$ 54.00			$ 54.00
01/31/92	GREAT ATLANTIC&PAC TEA CO INC CASH DIV ON 500 SHS RECORD 01/09/92 PAY 01/31/92	100.00			100.00
Total dividends earned		$ 154.00	$ 0.00		$ 154.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 885-03367-17 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
AMERICAN EXPRESS CO SHEARSON LEHMAN BROTHERS IS A SUBSIDIARY OF THIS FIRM	05/14/85	12/30/91 Sold	400	$ 22.88	$ 20.75	$ 9,196.00	$ 8,152.30	($ 1,043.70)#
WALT DISNEY COMPANY	03/14/88	01/21/92 Sold	100	35.80	128.50	3,633.16	12,769.23	9,136.07 #
	10/03/89	01/21/92 Sold	100	127.375	128.50	12,809.60	12,769.23	(40.37)
UNION CARBIDE CORP	02/28/89	12/30/91 Sold	200	30.25	20.50	6,151.00	4,013.96	(2,137.04)
Total realized gain or (loss)						$ 16,442.76	$ 25,538.46	$ 9,095.70
Total realized gain or (loss) - 1991								($ 3,180.74)

#Based on information supplied by your Financial Consultant.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100		$ 37.25		$ 3,725.00	Please provide purchase information
	02/24/84	200	17.37	37.25	3,544.00	7,450.00	3,906.00 #
AMGEN INC	01/10/89	300	5.541	70.50	1,662.50	21,150.00	19,487.50 #
	02/01/89	1,200	6.416	70.50	7,700.00	84,600.00	76,900.00
	03/15/89	170	6.958	70.50	1,182.92	11,985.00	10,802.08
	08/02/89	1,200	7.375	70.50	8,850.00	84,600.00	75,750.00
	05/21/90	300	12.041	70.50	3,662.50	21,150.00	17,487.50
CYTOGEN CORP	05/29/91	500	15.625	23.75	7,812.50	11,875.00	4,062.50
	01/14/92	500	30.00	23.75	15,000.00	11,875.00	(3,125.00)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26.00	30.75	5,285.70	6,150.00	864.30
	10/29/91	400	27.50	30.75	11,171.39	12,300.00	1,128.61
	11/11/91	200	26.50	30.75	5,785.70	6,150.00	364.30
GREAT ATLANTIC&PAC TEA CO INC	09/08/83	500	13.00	28.375	6,662.00	14,187.50	7,525.50 #

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Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
ICN PHARMACEUTICALS INC	01/02/92	300	$ 19.625	$ 23.625	$ 6,000.75	$ 7,087.50	$ 1,086.75
	01/20/92	200	23.25	23.625	4,748.48	4,725.00	(23.48)
LIN BROADCASTING CORP		158		74.50		11,771.00	Please provide purchase information
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	31.375	3,025.00	6,275.00	3,250.00 #
	02/11/86	300	13.37	31.375	4,012.50	9,412.50	5,400.00 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84		31.375		2,635.50	Please provide purchase information
SCHERING PLOUGH CORP	10/03/88	200	27.125	60.625	5,493.60	12,125.00	6,631.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	19.31	16,000.00	19,310.00	3,310.00
SYNTEX CORP	12/26/86	100	14.68	48.25	1,484.43	4,825.00	3,340.57 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	35.75	10,997.67	10,725.00	(272.67)
UPJOHN CO		50		41.25		2,062.50	Please provide purchase information
Total value					$ 130,081.84	$ 367,867.80**	$ 237,878.86

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 123,522.87	$ 475.69	$ 475.69
Total	$ 123,522.87	$ 475.69	$ 475.69

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Price Statement

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-03367-17 240
As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks	$ 347,561 25
Mutual funds	19,620 00
Margin account balance	-123,893 82
Other investments	28,575 80
Net value this period	$ 271,863 23
Net value last period	$ 294,298 93

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 317 00	$ 471 00	$ 0 00
Total	$ 317 00	$ 471 00	$ 0 00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095 70
Unrealized gain or (loss)	218,155 86	*Not applicable*

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -123,622 87
Interest charged on loans		-687 95	
Dividends credited	317 00		
Total	$ 317 00	$ -687 95	
Closing cash balance			$ -123,893 82

Margin account balance -123,893 82

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 02/28/92.

Stocks

Common stocks

Description	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 37 125	3 555%	$ 396 00	$ 11,137.50	Symbol: T\Rated. A-
AMGEN INC	OTC	3,170	65 25			206,842 50	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	19 75			19,750 00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	28 00	3 682	824 80	22,400.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	31 375	2 549	400.00	15,687 50	Symbol: GAP\Rated B+
ICN PHARMACEUTICALS INC	NYSE	500	18 00			9 000 00	Symbol: ICN\Rated. C
LIN BROADCASTING CORP	OTC	158	78 50			12,403 00	Symbol: LINB\Rated. B-
MCI COMMUNICATIONS CORP	OTC	500	35 00	285	50.00	17,500 00	Symbol: MCIC\Rated B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	33.00			2,772.00	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	58 50	2 256	264 00	11,700 00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	50 625	1.817	92 00	5,062 50	Symbol: SYN\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	37 50	1 92	216 00	11,250.00	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	41.125	3.306	68.00	2,056 25	Symbol: UPJ\Rated. A
Total value of stocks					**$ 2,310.80**	**$ 347,561.25**	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 19 62	$ 19 620 00	In cash account
Total value of mutual funds			**$ 19,620 00**	

Other investments

Description	No of shares	Price	Market value	Comment
F 1000 GUARANTEE FUTURES II L P	10	$ 1,300 91	$ 13,009 10	In cash account
S L FUTURES 1000 PLUS L P	15	1,037 78	15,566 70	In cash account
Total value of other investments			**$ 28,575 80**	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Data Statement

Account number 685-03367-17 240

Transaction details

Interest charged on loans

Date	Description	Amount
02/21/92	INTEREST CHARGED FOR 31 DAY(S) FROM 1/21 THRU 2/20 @ 8 1/4% CLOSING BALANCE 123,271 AVERAGE BALANCE 127,825	$ 687.95

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/03/92	AMERICAN TEL & TEL CO CASH DIV ON 300 SHS RECORD 12/31/91 PAY 02/01/92	$ 99.00			$ 99.00
02/03/92	UPJOHN CO CASH DIV ON 50 SHS RECORD 01/08/92 PAY 02/03/92	17.00			17.00
02/10/92	AMERICAN EXPRESS CO CASH DIV RECORD 01/03/92 PAY 02/10/92	100.00			100.00
02/20/92	WALT DISNEY COMPANY CASH DIV ON 200 SHS RECORD 01/10/92 PAY 02/20/92	35.00			35.00
02/24/92	SCHERING PLOUGH CORP CASH DIV ON 200 SHS RECORD 02/07/92 PAY 02/24/92	66.00			66.00
Total dividends earned		$ 317.00	$ 0.00		$ 317.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-03367-17 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100		$ 37.125		$ 3,712.50	Please provide purchase information
	02/24/84	200	17 37	37 125	3,544 00	7,425 00	3,881 00 #
AMGEN INC	01/10/89	300	5 541	65 25	1,662 50	19,575 00	17,912 50 #
	02/01/89	1,200	6 416	65 25	7,700 00	78,300 00	70,600 00
	03/15/89	170	6 958	65.25	1,182 92	11,092.50	9,909 58
	06/02/89	1,200	7 375	65 25	8,850 00	78,300 00	69,450 00
	05/21/90	300	12 041	65 25	3,662 50	19,575 00	15,912 50
CYTOGEN CORP	05/29/91	500	15 625	19 75	7,812.50	9,875.00	2,062 50
	01/14/92	500	30 00	19 75	15,000 00	9,875 00	(5,125 00)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26 00	28.00	5,285.70	5,600 00	314 30
	10/29/91	400	27 50	28.00	11,171 39	11,200 00	28 61
	11/11/91	200	28.50	28.00	5,785.70	5,600 00	(185 70)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	13 00	31.375	6,662 00	15,687 50	9,025 50 #
ICN PHARMACEUTICALS INC	01/02/92	300	19 625	18.00	6,000 75	5,400 00	(600 75)
	01/20/92	200	23 25	18 00	4,748 48	3,600 00	(1,148 48)
LIN BROADCASTING CORP		158		78.50		12,403.00	Please provide purchase information
MCI COMMUNICATIONS CORP	01/18/84	200	15 12	35 00	3,025 00	7,000 00	3,975 00 #
	02/11/86	300	13 37	35 00	4,012 50	10,500 00	6,487 50 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84		33 00		2,772 00	Please provide purchase information
SCHERING PLOUGH CORP	10/03/88	200	27 125	58 50	5,493 60	11,700 00	6,206 40
SMALLCAP WORLD FUND INC	04/20/90	1,000	18 00	19 62	18,000 00	19,620 00	3,620 00
SYNTEX CORP	12/26/88	100	14 68	50 625	1,484 43	5,062 50	3,578 07 #
TEXAS INSTRUMENTS INC	01/30/91	300	36 125	37 50	10,997 67	11,250 00	252 33

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Account number 685-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
UPJOHN CO		50		$ 41.125		$ 2,056.25	Please provide purchase information
Total value					$ 130,081.84	$ 346,237.50**	$ 216,155.66

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 123,893.82	$ 687.95	$ 1,163.64
Total	$ 123,893.82	$ 687.95	$ 1,163.64

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 8.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Plus Statement

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks		$ 331,857 00
Mutual funds		19,040 00
Margin account balance		-124,537 59
Other investments		28,438 20
Net value this period		$ 254,597.61
Net value last period	$ 271,863.23	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 23 00	$ 494 00	$ 0 00
Total	$ 23 00	$ 494 00	$ 0 00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095 70
Unrealized gain or (loss)	200,470 86	*Not applicable*

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -123,893 82
Interest charged on loans		-666 77	
Dividends credited	23 00		
Total	$ 23 00	$ -666 77	
Closing cash balance			$ -124,537 59

Margin account balance -124,537 59

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Price Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/31/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	40.75	3.239	396.00	12,225.00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	62 50			198,125.00	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	17.50			17,500.00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	27.125	3.60	824.80	21,700.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	32 375	2 471	400 00	16,187.50	Symbol: GAP\Rated: B +
ICN PHARMACEUTICALS INC	NYSE	500	15 375			7,687.50	Symbol: ICN\Rated: C
LIN BROADCASTING CORP	OTC	158	74.50			11,771.00	Symbol: LINB\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	33 00	.303	50 00	16,500.00	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	29.00			2,436.00	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	56.375	2.341	264.00	11,275.00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	46.00	2.00	92.00	4,600.00	Symbol: SYN\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	32.625	2.208	216.00	9,787.50	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	37.25	3.651	68.00	1,862.50	Symbol: UPJ\Rated: A
Total value of stocks					$ 2,210.80	$ 331,687.00	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 19.04	$ 19,040.00	In cash account
Total value of mutual funds			$ 19,040 00	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,289 64	$ 12,896.40	In cash account
B L FUTURES 1000 PLUS L P	15	1,036 12	15,541 80	In cash account
Total value of other investments			$ 28,438.20	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Transaction details

Interest charged on loans

Date	Description	Amount
03/23/92	INTEREST CHARGED FOR 31 DAY(S) FROM 2/21 THRU 3/22 @ 8 1/4% CLOSING BALANCE 123,870 AVERAGE BALANCE 123,889	$ 666 77

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
03/09/92	SYNTEX CORP CASH DIV ON 100 SHS RECORD 02/14/92 PAY 03/09/92	$ 23 00			$ 23 00
Total dividends earned		$ 23 00	$ 0.00		$ 23 00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 40 75		$ 4,075 00	Not available
AMGEN INC	02/24/84	200	17 37	40 75	3,544 00	8,150 00	4,606 00
	01/10/89	300	5 541	62 50	1,662 50	18,750 00	17,087 50
	02/01/89	1,200	6 416	62 50	7,700 00	75,000 00	67,300 00
	03/15/89	170	6 958	62 50	1,182 92	10,625 00	9,442 08
	06/02/89	1,200	7 375	62 50	8,850 00	75,000 00	66,150 00
	05/21/90	300	12 041	62 50	3,662 50	18,750 00	15,087 50
CYTOGEN CORP	05/29/91	500	15 625	17 50	7,812 50	8,750 00	937 50
	01/14/92	500	30 00	17.50	15,000 00	8,750.00	(6,250.00)

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	$ 28.00	$ 27.125	$ 5,285.70	$ 5,425.00	$ 139.30
	10/29/91	400	27.50	27.125	11,171.39	10,850.00	(321.39)
	11/11/91	200	28.50	27.125	5,785.70	5,425.00	(360.70)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	13.00	32.375	6,662.00	16,187.50	9,525.50 #
ICN PHARMACEUTICALS INC	01/02/92	300	19.625	15.375	6,000.75	4,612.50	(1,388.25)
	01/20/92	200	23.25	15.375	4,748.48	3,075.00	(1,673.48)
LIN BROADCASTING CORP		158	Please provide	74.50		11,771.00	Not available
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	33.00	3,025.00	6,600.00	3,575.00 #
	02/11/86	300	13.37	33.00	4,012.50	9,900.00	5,887.50 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84	Please provide	29.00		2,436.00	Not available
SCHERING PLOUGH CORP	10/03/88	200	27.125	56.375	5,493.60	11,275.00	5,781.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	19.04	16,000.00	19,040.00	3,040.00
SYNTEX CORP	12/28/88	100	14.68	46.00	1,484.43	4,600.00	3,115.57 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	32.625	10,997.67	9,787.50	(1,210.17)
UPJOHN CO		50	Please provide	37.25		1,862.50	Not available
Total value					**$ 130,061.84**	**$ 330,532.60 **	**$ 200,470.86**

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total.*

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 124,537.58	$ 666.77	$ 1,830.41
Total	**$ 124,537.58**	**$ 666.77**	**$ 1,830.41**

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Fund Statement

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 308,104 00
Mutual funds	18,800 00
Margin account balance	-125,110.60
Other investments	28,347 55
Net value this period	**$ 230,140.95**
Net value last period	**$ 254,597 61**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 54 00	$ 548 00	$ 0 00
Total	$ 54 00	$ 548 00	$ 0 00

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095 70
Unrealized gain or (loss)	178,750 86	*Not applicable*

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			**$ -124,537 59**
Interest charged on loans		-627 01	
Dividends credited	54 00		
Total	$ 54 00	$ -627 01	
Closing cash balance			**$ -125,110 60**

Margin account balance -125,110 60

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Monthly Client Portfolio Statement

CONGRESSMAN NICK JOE RAHALL II — Account number 685-03367-17 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/30/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	43 25	3.052	396 00	12,975.00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	56 00			177,520.00	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	15 625			15,625.00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	26 625	2.384	508.00	21,300.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	32 00	2 50	400 00	16,000 00	Symbol: GAP\Rated. B +
ICN PHARMACEUTICALS INC	NYSE	500	12 875			6,437.50	Symbol: ICN\Rated. C
LIN BROADCASTING CORP	OTC	158	73 00			11,534 00	Symbol: LINB\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	33.375	299	50 00	16,687.50	Symbol. MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	28.125			2,362.50	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	54.875	2 842	312.00	10,975.00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	44.50	2.337	104.00	4,450.00	Symbol: SYN\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	34 625	2.079	218 00	10,387.50	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	37.00	3 675	68.00	1,850.00	Symbol: UPJ\Rated: A
Total value of stocks					$ 2,054.00	$ 309,104.00	

Mutual funds

Description	Number of shares	Price	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18.80	$ 18,800 00	In cash account
Total value of mutual funds			$ 18,800.00	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,296 25	$ 12,962 50	In cash account
S L FUTURES 1000 PLUS L P	15	1,025 67	15,385 05	In cash account
Total value of other investments			$ 28,347.65	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Customer Office Copy Screened

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Transaction details

Interest charged on loans

Date	Description	Amount
04/21/92	INTEREST CHARGED FOR 29 DAY(S) FROM 3/23 THRU 4/20 @ 8 1/4% CLOSING BALANCE 124,537 AVERAGE BALANCE 124,537	$ 627.01

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
04/27/92	TEXAS INSTRUMENTS INC	CASH DIV ON 300 SHS RECORD 04/01/92 PAY 04/27/92	$ 54.00		$ 54.00
Total dividends earned			$ 54.00	$ 0.00	$ 54.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 43.25		$ 4,325.00	Not available
	02/24/84	200	17.37	43.25	3,544.00	8,650.00	5,106.00 #
AMGEN INC	01/10/89	300	5.541	56.00	1,662.50	16,800.00	15,137.50 #
	02/01/89	1,200	6.416	56.00	7,700.00	67,200.00	59,500.00
	03/15/89	170	6.958	56.00	1,182.92	9,520.00	8,337.08
	06/02/89	1,200	7.375	56.00	8,850.00	67,200.00	58,350.00
	05/21/90	300	12.041	56.00	3,662.50	16,800.00	13,137.50
CYTOGEN CORP	05/29/91	500	15.625	15.625	7,812.50	7,812.50	0.00
	01/14/92	500	30.00	15.625	15,000.00	7,812.50	(7,187.50)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26.00	26.625	5,285.70	5,325.00	39.30
	10/29/91	400	27.50	26.625	11,171.39	10,650.00	(521.39)
	11/11/91	200	28.50	26.625	5,785.70	5,325.00	(460.70)

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	$ 13.00	$ 32.00	$ 6,662.00	$ 16,000.00	$ 9,338.00 #
ICN PHARMACEUTICALS INC	01/02/92	300	19.625	12.875	6,000.75	3,862.50	(2,138.25)
	01/20/92	200	23.25	12.875	4,748.48	2,575.00	(2,173.48)
LIN BROADCASTING CORP		158	Please provide	73.00		11,534.00	Not available
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	33.375	3,025.00	6,675.00	3,650.00 #
	02/11/86	300	13.37	33.375	4,012.50	10,012.50	6,000.00 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84	Please provide	28.125		2,362.50	Not available
SCHERING PLOUGH CORP	10/03/88	200	27.125	54.875	5,493.60	10,975.00	5,481.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.80	16,000.00	18,800.00	2,800.00
SYNTEX CORP	12/26/88	100	14.68	44.50	1,484.43	4,450.00	2,965.57 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	34.625	10,997.67	10,387.50	(610.17)
UPJOHN CO		50	Please provide	37.00		1,850.00	Not available
Total yours					$ 130,081.84	$ 306,832.60**	$ 176,750.86

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total.*

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 125,110.60	$ 627.01	$ 2,457.42
Total	$ 125,110.60	$ 627.01	$ 2,457.42

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Price Statement

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 328,032.50
Mutual funds	16,960.00
Margin account balance	-125,495.00
Other investments	28,173.20
Net value this period	$ 247,670.70
Net value last period	$ 230,140.95

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 520.82	$ 1,068.82	$ 0.00
Total	$ 520.82	$ 1,068.82	$ 0.00

Additional summary information

	This period	This year
FRGN tax withheld	$ 34.02	$ 34.02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 9,095.70
Unrealized gain or (loss)	196,035.88	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Client Firm Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -125,110 60
Withdrawals		-40.00	
Interest charged on loans		-651.23	
Gold Card payment/credit adjustment		-179.97	
Dividends credited	486 80		
Total	$ 486 80	$ -871 20	
Closing cash balance			$ -125,495 00

Margin account balance -125,495 00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/29/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	42.50	3.105	396.00	12,750.00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	61.00			193,370.00	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	18.50			18,500.00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	28.25	2.254	509.60	22,600.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	32.25	2 48	400.00	16,125.00	Symbol: GAP\Rated: B+
ICN PHARMACEUTICALS INC	NYSE	500	13 00			6,500.00	Symbol: ICN\Rated: C
LIN BROADCASTING CORP	OTC	158	87 00			10,586.00	Symbol: LINB\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	32 125	311	50 00	16,062.50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	27.25			2,289.00	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	52 00	3 00	312 00	10,400.00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	38 125	2.727	104 00	3,812.50	Symbol: SYN\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks *continued*

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
TEXAS INSTRUMENTS INC	NYSE	300	37.625	1.913	216.00	11,287.50	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	35.00	3.885	68.00	1,750.00	Symbol: UPJ\Rated: A
Total value of stocks					$ 2,056.60	$ 328,032.50	

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18 96		$ 18,960.00	In cash account
Total value of mutual funds				$ 18,960.00	

Other Investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,305 47	$ 13,054.70	In cash account
S L FUTURES 1000 PLUS L P	15	1,007.90	15,118.50	In cash account
Total value of other investments			$ 28,173.20	

Transaction details

Withdrawals

Date	Description	Reference no.	Amount
05/05/92	FROM 685-03367-02 TO 685-60527-01 CUSTODIAL FEE		$ 40 00

Interest charged on loans

Date	Description	Amount
05/21/92	INTEREST CHARGED FOR 30 DAY(S) FROM 4/21 THRU 5/20 @ 6 1/4% CLOSING BALANCE 124,921 AVERAGE BALANCE 125,036	$ 651 23

SHEARSON LEHMAN BROTHERS INC.

Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Gold Card activity

Gold Card number 3713 527851 21017
The following were charged or credited to your Gold Card.

Description	Reference no	Amount
THE PRIME RIB WASHINGTON DC 428050245 FOOD/BEV 03/26/92	501088	$ 150.35
THE PRIME RIB WASHINGTON DC 201070155 FOOD/BEV 03/26/92	501088	29.62
Total charges		$ 179.97
Payment for Gold Card charges 05/04/92		$ 179.97

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
05/01/92	AMERICAN TEL & TEL CO	CASH DIV ON 300 SHS RECORD 03/31/92 PAY 05/01/92	$ 99.00		$ 99.00
05/01/92	GREAT ATLANTIC&PAC TEA CO INC	CASH DIV ON 500 SHS RECORD 04/13/92 PAY 05/01/92	100.00		100.00
05/01/92	UPJOHN CO	CASH DIV ON 50 SHS RECORD 04/07/92 PAY 05/01/92	17.00		17.00
05/11/92	*** GLAXO HOLDINGS PLC SPONSORED ADR	FOREIGN TAX W/HELD $ 34.02 CASH DIV ON 600 SHS RECORD 03/05/92 PAY 05/11/92	226.82		192.80
05/26/92	SCHERING PLOUGH CORP	CASH DIV ON 200 SHS RECORD 05/08/92 PAY 05/26/92	78.00		78.00
Total dividends credited to account					$ 486.80
FRGN tax withheld					34.02
Total dividends earned			$ 520.82	$ 0.00	$ 520.82

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Client Tax Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 42.50		$ 4,250.00	Not available
	02/24/84	200	17.37	42.50	3,544.00	8,500.00	4,956.00 #
AMGEN INC	01/10/89	300	5 541	61.00	1,662.50	18,300.00	16,637.50 #
	02/01/89	1,200	6 416	61.00	7,700.00	73,200.00	65,500.00
	03/15/89	170	6 958	61.00	1,182.92	10,370.00	9,187.08
	06/02/89	1,200	7 375	61.00	8,850.00	73,200.00	64,350.00
	06/21/89	300	12 041	61 00	3,662.50	18,300.00	14,637.50
CYTOGEN CORP	05/29/91	500	15.625	18 50	7,812.50	9,250.00	1,437.50
	01/14/92	500	50 00	18.50	15,000.00	9,250.00	(5,750.00)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26.00	28.25	5,285.70	5,650.00	364.30
	10/29/91	400	27.50	28.25	11,171.39	11,300.00	128.61
	11/11/91	200	28.50	28.25	5,785.70	5,650.00	(135.70)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	13 00	32.25	6,662.00	16,125.00	9,463 00 #
ICN PHARMACEUTICALS INC	01/02/92	300	19 825	13.00	6,000.75	3,900.00	(2,100.75)
	01/20/92	200	23.25	13.00	4,748.48	2,600.00	(2,148.48)
LIN BROADCASTING CORP		158	Please provide	67.00		10,586.00	Not available
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	32.125	3,025.00	6,425.00	3,400.00 #
	02/11/86	300	13.37	32.125	4,012.50	9,637.50	5,625.00 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84	Please provide	27.25		2,289.00	Not available
SCHERING PLOUGH CORP	10/03/88	200	27.125	52.00	5,493 60	10,400.00	4,906 40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16 00	18.96	16,000.00	18,960.00	2,960 00
SYNTEX CORP	12/26/88	100	14 68	38.125	1,484.43	3,812.50	2,328.07 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	37.625	10,997.67	11,287.50	289.83

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Portfolio Flow Data Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 665-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
UPJOHN CO		50	Please provide	$ 35.00		$ 1,750.00	Not available
Total value					$ 130,081.84	$ 326,117.50**	$ 196,035.66

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total.*

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 125,495.00	$ 651.23	$ 3,108.65
Total	$ 125,495.00	$ 651.23	$ 3,108.65

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

June 30, 1992

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 316,954.25
Mutual funds	18,440.00
Margin account balance	-126,091.03
Other investments	29,774.30
Net value this period	$ 239,077.62
Net value last period	$ 247,870.70

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 101.00	$ 1,169.82	$ 0.00
Total	$ 101.00	$ 1,169.82	$ 0.00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 34.02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 9,095.70
Unrealized gain or (loss)	187,232.11	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Mark Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -125,495 00
Withdrawals		0.00	
Interest charged on loans		-697.03	
Gold Card payment/credit adjustment		0.00	
Dividends credited	101 00		
Total	$ 101 00	$ -697.03	
Closing cash balance			$ -126,091 03

Margin account balance -126,091.03

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/30/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	43.00	3 069	396.00	12,900.00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	60 875			192,973 75	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	17.375			17,375 00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	25.375	2.51	509.60	20,300.00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	27.00	2 962	400.00	13,500 00	Symbol: GAP\Rated: B +
ICN PHARMACEUTICALS INC	NYSE	500	10 25			5,125 00	Symbol: ICN\Rated: C
LIN BROADCASTING CORP	OTC	158	64 00			10,112 00	Symbol: LINB\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	32 125	311	50 00	16,062.50	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	24 625			2,068 50	Symbol: MCAWA
SCHERING PLOUGH CORP	NYSE	200	54 875	2 842	312 00	10,975.00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	34 25	3.036	104.00	3,425.00	Symbol: SYN\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Practice Client FMA Statement

CONGRESSMAN NICK JOE RAHALL II — Account number 685-03367-17 240

Stocks *continued*

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
TEXAS INSTRUMENTS INC	NYSE	300	35.125	2.049	216.00	10,537.50	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	32.00	4.25	68.00	1,600.00	Symbol: UPJ\Rated: A
Total value of stocks					$ 2,055.60	$ 318,954.25	

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18 44		$ 18,440.00	In cash account
Total value of mutual funds				$ 18,440.00	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,330.25	$ 13,302.50	In cash account
S L FUTURES 1000 PLUS L P	15	1,098.12	16,471.80	In cash account
Total value of other investments			$ 29,774.30	

Transaction details

Interest charged on loans

Date	Description	Amount
06/22/92	INTEREST CHARGED FOR 32 DAY(S) FROM 5/21 THRU 6/21 @ 6 1/4% CLOSING BALANCE 125,394 AVERAGE BALANCE 125,465	$ 697.03

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/04/92	SMALLCAP WORLD FUND INC	CASH DIV ON 1000 SHS RECORD 05/29/92 PAY 06/01/92	$ 50.00		$ 50.00
06/08/92	SYNTEX CORP	CASH DIV ON 100 SHS RECORD 05/15/92 PAY 06/08/92	28.00		28.00
06/19/92	MCI COMMUNICATIONS CORP	CASH DIV ON 500 SHS RECORD 05/29/92 PAY 06/19/92	25.00		25.00
[illegible]			$ 101.00	$ 0.00	$ 101.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 43.00		$ 4,300.00	Not available
	02/24/84	200	17.37	43.00	3,544.00	8,600.00	5,056.00 #
AMGEN INC	01/10/89	300	5.541	60.875	1,662.50	18,262.50	16,600.00 #
	02/01/89	1,200	6.416	60.875	7,700.00	73,050.00	65,350.00
	03/15/89	170	6.958	60.875	1,182.92	10,348.75	9,165.83
	06/02/89	1,200	7.375	60.875	8,850.00	73,050.00	64,200.00
	05/21/90	300	12.041	60.875	3,662.50	18,262.50	14,600.00
CYTOGEN CORP	05/29/91	500	15.625	17.375	7,812.50	8,687.50	875.00
	01/14/92	500	30.00	17.375	15,000.00	8,687.50	(6,312.50)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26.00	25.375	5,285.70	5,075.00	(210.70)
	10/29/91	400	27.50	25.375	11,171.39	10,150.00	(1,021.39)
	11/11/91	200	28.50	25.375	5,785.70	5,075.00	(710.70)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	13.00	27.00	6,662.00	13,500.00	6,838.00 #
ICN PHARMACEUTICALS INC	01/02/92	300	19.625	10.25	6,000.75	3,075.00	(2,925.75)
	01/20/92	200	23.25	10.25	4,748.48	2,050.00	(2,698.48)
LIN BROADCASTING CORP		158	Please provide	64.00		10,112.00	Not available

SHEARSON LEHMAN BROTHERS

CONGRESSMAN NICK JOE RAHALL II — Account number 885-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
MCI COMMUNICATIONS CORP	01/18/84	200	$ 15.12	$ 32.125	$ 3,025.00	$ 6,425.00	$ 3,400.00 #
	02/11/86	300	13.37	32.125	4,012.50	9,637.50	5,625.00 #
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84	Please provide	24.625		2,068.50	Not available
SCHERING PLOUGH CORP	10/03/88	200	27.125	54.875	5,493.60	10,975.00	5,481.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.44	16,000.00	18,440.00	2,440.00
SYNTEX CORP	12/26/86	100	14.68	34.25	1,484.43	3,425.00	1,940.57 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	35.125	10,997.67	10,537.50	(460.17)
UPJOHN CO		50	Please provide	32.00		1,600.00	Not available
Total value					$ 130,081.64	$ 317,313.75**	$ 187,232.11

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total.*

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 126,091.03	$ 697.03	$ 3,805.68
Total	$ 126,091.03	$ 697.03	$ 3,805.68

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 8.75 % to 8.75 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks		$ 344 749 00
Mutual funds		18 400 00
Margin account balance		-130 646 80
Other investments		30 627.35
Net value this period		$ 263,129.55
Net value last period	$ 239,077.62	

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non taxable
Dividends	$ 54 00	$ 1,223 82	$ 0 00
Total	$ 54 00	$ 1,223 82	$ 0 00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0 00	$ 34 02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095.70
Unrealized gain or (loss)	209,607 66	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Plus Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -126,091 03
Securities bought and other subtractions		-3,995.68	
Securities sold and other additions	0 00		
Withdrawals		0 00	
Interest charged on loans		-614 09	
Gold Card payment/credit adjustment		0.00	
Dividends credited	54 00		
Total	$ 54 00	$ -4,609 77	
Closing cash balance			$ -130,646 80

Margin account balance -130,646 80

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/31/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated Income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 43 875	3.008%	$ 396 00	$ 13,162 50	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	65 50			207,635 00	Symbol: AMGN\Rated: B-
CYTOGEN CORP	OTC	1,000	19 00			19 000 00	Symbol: CYTO\Rated: C
*** GLAXO HOLDINGS PLC SPONSORED ADR	NYSE	800	27 50	2 316	509 80	22,000 00	Symbol: GLX
GREAT ATLANTIC&PAC TEA CO INC	NYSE	500	26 75	2 99	400 00	13,375 00	Symbol: GAP\Rated: B +
ICN PHARMACEUTICALS INC	NYSE	500	11 25			5,625 00	Symbol: ICN\Rated: C
LIN BROADCASTING CORP	OTC	158	69 50			10 981 00	Symbol: LINB\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	33 75	296	50 00	16 875 00	Symbol: MCIC\Rated: B
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW	OTC	84	27 625			2,320 50	Symbol: MCAWA
OCCIDENTAL PETROLEUM CORP-DEL	NYSE	200	20 50	4 878	200 00	4,100 00	Symbol: OXY\Rated: B-
SCHERING PLOUGH CORP	NYSE	200	59 875	2 605	312 00	11,975 00	Symbol: SGP\Rated: A
SYNTEX CORP	NYSE	100	33 625	3 092	104 00	3,362 50	Symbol: SYN\Rated: A

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Consolidated Quarterly Asset Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Stocks *continued*

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
TEXAS INSTRUMENTS INC	NYSE	300	$ 41 875	1.710%	$ 216.00	$ 12,562.50	Symbol: TXN\Rated: B-
UPJOHN CO	NYSE	50	35 50	3.83	68.00	1,775.00	Symbol: UPJ\Rated: A
Total value of stocks					$ 2,258.60	$ 344,749.00	

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18 40		$ 18,400.00	In cash account
Total value of mutual funds				$ 18,400.00	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,318 63	$ 13,186.30	In cash account
S L FUTURES 1000 PLUS L P	15	1,164 07	17,481.05	In cash account
Total value of other investments			$ 30,827.35	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/14/92	Bought	OCCIDENTAL PETROLEUM CORP-DEL	200	$ 19 50	$ -3,995 68
Total securities bought and other subtractions					$ -3,995 68
Total securities sold and other additions					$ 0 00

Interest charged on loans

Date	Description	Amount
07/21/92	INTEREST CHARGED FOR 29 DAY(S) FROM 6/22 THRU 7/20 @ 8 % CLOSING BALANCE 130,032 AVERAGE BALANCE 127,053	$ 814 09

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

CONGRESSMAN NICK JOE RAHALL II

Account number 885-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
07/20/92	TEXAS INSTRUMENTS INC	CASH DIV ON 300 SHS RECORD 07/01/92 PAY 07/20/92	$ 54.00		$ 54.00
Total dividends earned			$ 54.00	$ 0.00	$ 54.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 43.875		$ 4,387.50	Not available
	02/24/84	200	17.37	43.875	3,544.00	8,775.00	5,231.00 #
AMGEN INC	01/10/89	300	5.541	65.50	1,662.50	19,650.00	17,987.50 #
	02/01/89	1,200	6.416	65.50	7,700.00	78,600.00	70,900.00
	03/15/89	170	6.958	65.50	1,182.92	11,135.00	9,952.08
	06/02/89	1,200	7.375	65.50	8,850.00	78,600.00	69,750.00
	05/21/90	300	12.041	65.50	3,662.50	19,650.00	15,987.50
CYTOGEN CORP	05/29/91	500	15.625	19.00	7,812.50	9,500.00	1,687.50
	01/14/92	500	30.00	19.00	15,000.00	9,500.00	(5,500.00)
*** GLAXO HOLDINGS PLC SPONSORED ADR	10/25/91	200	26.00	27.50	5,285.70	5,500.00	214.30
	10/29/91	400	27.50	27.50	11,171.39	11,000.00	(171.39)
	11/11/91	200	28.50	27.50	5,785.70	5,500.00	(285.70)
GREAT ATLANTIC&PAC TEA CO INC	09/06/83	500	13.00	26.75	6,662.00	13,375.00	6,713.00 #
ICN PHARMACEUTICALS INC	01/02/92	300	19.625	11.25	6,000.75	3,375.00	(2,625.75)
	01/20/92	200	23.25	11.25	4,748.48	2,250.00	(2,498.48)
LIN BROADCASTING CORP		158	Please provide	69.50		10,981.00	Not available
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	33.75	3,025.00	6,750.00	3,725.00 #
	02/11/86	300	13.37	33.75	4,012.50	10,125.00	6,112.50 #

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Monthly Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Unrealized gain or loss
continued

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
MCCAW CELLULAR COMMUNICATIONS INC CL A NEW		84	Please provide	$ 27.625		$ 2,320.50	Not available
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	19.50	20.50	3,995.68	4,100.00	104.32
SCHERING PLOUGH CORP	10/03/88	200	27.125	59.875	5,493.60	11,975.00	6,481.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.40	16,000.00	18,400.00	2,400.00
SYNTEX CORP	12/26/86	100	14.68	33.625	1,464.43	3,362.50	1,878.07 #
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	41.875	10,997.67	12,562.50	1,564.83
UPJOHN CO		50	Please provide	35.50		1,775.00	Not available
Total value					$ 134,077.32	$ 343,685.00**	$ 209,607.68

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total*

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 130,646.80	$ 814.09	$ 4,419.77
Total	$ 130,646.80	$ 814.09	$ 4,419.77

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.50 % to 8.50 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

[illegible] August 31, 1992

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Account value

Stocks	$ 257,523 75
Mutual funds	17,920 00
Margin account balance	-130,999 17
Other investments	31,350 75
Net value this period	**$ 175,795.33**
Net value last period	**$ 263,129 55**

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 294 00	$ 1,517 82	$ 0 00
Total	$ 294 00	$ 1,517 82	$ 0 00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 34 02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095 70
Unrealized gain or (loss)	201,092 38	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Fine Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -130,646 80
Withdrawals		0.00	
Interest charged on loans		-646 37	
Gold Card payment/credit adjustment		0.00	
Dividends credited	294 00		
Total	$ 294 00	$ -646 37	
Closing cash balance			$ -130,999 17

Margin account balance -130,999 17

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 08/31/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 42.25	3.124%	$ 396.00	$ 12,675 00	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	63.375			200,898.75	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	33.375	.299	50 00	16,687 50	Symbol: MCIC\Rated: B
OCCIDENTAL PETROLEUM CORP-DEL	NYSE	200	19 875	5 031	200.00	3,975 00	Symbol: OXY\Rated: B-
SCHERING PLOUGH CORP	NYSE	200	58.50	2 666	312 00	11,700 00	Symbol: SGP\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	38 625	1 864	216 00	11,587 50	Symbol: TXN\Rated: B-
Total value of stocks					$ 1,174.00	$ 257,523.75	

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 17 92		$ 17,920 00	In cash account
Total value of mutual funds				$ 17,920 00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Monthly Client Fax Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,314.90	$ 13,149.00	In cash account
S L FUTURES 1000 PLUS L P	15	1,213.45	18,201.75	In cash account
Total value of other investments			$ 31,350.78	

Transaction details

Other security activity

Date	Activity	Description	Quantity
08/14/92	Delivered	CYTOGEN CORP 0015 232824102 00/00/00	-1,000
08/14/92	Delivered	*** GLAXO HOLDINGS PLC SPONSORED ADR 0015 377327309 00/00/00	-800
08/14/92	Delivered	GREAT ATLANTIC&PAC TEA CO INC 0015 390064103 00/00/00	-500
08/14/92	Delivered	ICN PHARMACEUTICALS INC 0015 448290105 00/00/00	-500
08/14/92	Delivered	LIN BROADCASTING CORP 0015 532763109 00/00/00	-158
08/14/92	Delivered	MCCAW CELLULAR COMMUNICATIONS INC CL A NEW 0015 579468109 00/00/00	-84
08/14/92	Delivered	SYNTEX CORP 0015 871616106 00/00/00	-100
08/14/92	Delivered	UPJOHN CO 0015 915302103 00/00/00	-50

Interest charged on loans

Date	Description	Amount
08/21/92	INTEREST CHARGED FOR 31 DAY(S) FROM 7/21 THRU 8/20 @ 5 3/4% CLOSING BALANCE 130,430 AVERAGE BALANCE 130,543	$ 646 37

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
08/03/92	AMERICAN TEL & TEL CO	CASH DIV ON 300 SHS RECORD 08/30/92 PAY 08/01/92	$ 99.00		$ 99.00
08/03/92	UPJOHN CO	CASH DIV ON 50 SHS RECORD 07/06/92 PAY 08/03/92	17.00		17.00
08/10/92	GREAT ATLANTIC&PAC TEA CO INC	CASH DIV ON 500 SHS RECORD 07/24/92 PAY 08/10/92	100.00		100.00
08/28/92	SCHERING PLOUGH CORP	CASH DIV ON 200 SHS RECORD 08/07/92 PAY 08/28/92	78.00		78.00
Total dividends earned			$ 294.00	$ 0.00	$ 294.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 42.25		$ 4,225.00	Not available
	02/24/84	200	17.37	42.25	3,544.00	8,450.00	4,906.00 #
AMGEN INC	01/10/89	300	5.541	63.375	1,662.50	19,012.50	17,350.00 #
	02/01/89	1,200	6.416	63.375	7,700.00	76,050.00	68,350.00
	03/15/89	170	6.958	63.375	1,182.92	10,773.75	9,590.83
	06/02/89	1,200	7.375	63.375	8,850.00	76,050.00	67,200.00
	05/21/90	300	12.041	63.375	3,662.50	19,012.50	15,350.00
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	33.375	3,025.00	6,675.00	3,650.00 #
	02/11/86	300	13.37	33.375	4,012.50	10,012.50	6,000.00 #
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	19.50	19.875	3,995.68	3,975.00	(20.68)
SCHERING PLOUGH CORP	10/03/88	200	27.125	58.50	5,493.60	11,700.00	6,206.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	18.00	17.92	18,000.00	17,920.00	1,920.00

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Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
TEXAS INSTRUMENTS INC	01/30/91	300	$ 36.125	$ 38.625	$ 10,997.67	$ 11,587.50	$ 589.83
Total value					$ 70,126.37	$ 271,218.75**	$ 201,092.38

#Based on information supplied by your Financial Consultant.

***Only items with cost basis are included in this total.*

Credit resources

Please retain this information for your records

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 130,999.17	$ 646.37	$ 5,068.14
Total	$ 130,999.17	$ 646.37	$ 5,068.14

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.25 % to 8.25 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

[illegible]

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 257,455 00
Mutual funds	18,010 00
Margin account balance	-132,851 50
Other investments	31,580 20
Net value this period	**$ 174,193.70**
Net value last period	$ 175,795.33

Bulletin board

Research Rankings Are Now On Your Statement.
As an added service, the research rankings of all common stocks followed by our analysts are featured in the Portfolio details section of your statement. Definitions of rankings appear on the back of the statement. For more information on our highly rated equity research, contact your Financial Consultant

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes For more information, please call your Financial Consultant

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 0 00	$ 1,517 82	$ 0 00
Total	$ 0 00	$ 1,517 82	$ 0 00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0 00	$ 34 02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0 00	$ 9,095.70
Unrealized gain or (loss)	200,976.13	*Not applicable*

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Statement of Client Cash Transactions

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -130,999.17
Withdrawals		0.00	
Interest charged on loans		-652.33	
Gold Card payment/credit adjustment		0.00	
Checks written		-1,200.00	
Total	$ 0.00	$ -1,852.33	
Closing cash balance			$ -132,851.50

Cash	0.00
Margin account balance	-132,851.50

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/30/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 43.625	3.025%	$ 396.00	$ 13,087.50	2/M	Symbol: T\Rated: A-
AMGEN INC	OTC	3,170	62.75			198,917.50	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	35.125	.284	50.00	17,562.50	2/H	Symbol: MCIC\Rated: B
OCCIDENTAL PETROLEUM CORP-DEL	NYSE	200	17.625	5.673	200.00	3,525.00	3/M	Symbol: OXY\Rated: B-
SCHERING PLOUGH CORP	NYSE	200	56.75	2.748	312.00	11,350.00	1/M	Symbol: SGP\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	43.375	1.659	218.00	13,012.50	1/H	Symbol: TXN\Rated: B-
Total value of stocks					$ 1,174.00	$ 257,455.00		

*Please refer to the back of the statement for definitions of research rankings.

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18.01		$ 18,010.00	In cash account
Total value of mutual funds				$ 18,010.00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II — Account number 685-03367-17 240

Other investments

Description	No. of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,339.84	$ 13,398.40	In cash account
S L FUTURES 1000 PLUS L P	15	1,212.12	18,181.80	In cash account
Total value of other investments			$ 31,580.20	

Transaction details

Interest charged on loans

Date	Description	Amount
09/21/92	INTEREST CHARGED FOR 31 DAY(S) FROM 8/21 THRU 9/20 @ 5 3/4% CLOSING BALANCE 132,199 AVERAGE BALANCE 131,747	$ 652.33

Checks written

Account number 1200111840 - Boston Safe Deposit & Trust Company

Check no	Date cleared	Date written	Description	Reference no	Tracking code	Amount
00102	09/02/92	09/01/92	NICK JOE RAHALL II	10715128		$ 1,200.00
Total checks written						$ 1,200.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 43.625		$ 4,362.50	Not available
	02/24/84	200	17.37	43.625	3,544.00	8,725.00	5,181.00 #
AMGEN INC	01/10/89	300	5.541	62.75	1,662.50	18,825.00	17,162.50 #
	02/01/89	1,200	6.416	62.75	7,700.00	75,300.00	67,600.00
	03/15/89	170	6.958	62.75	1,182.92	10,667.50	9,484.58
	06/02/89	1,200	7.375	62.75	8,850.00	75,300.00	66,450.00
	05/21/90	300	12.041	62.75	3,662.50	18,825.00	15,162.50
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	35.125	3,025.00	7,025.00	4,000.00 #
	02/11/86	300	13.37	35.125	4,012.50	10,537.50	6,525.00 #

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	$ 19.50	$ 17.625	$ 3,995.68	$ 3,525.00	($ 470.68)
SCHERING PLOUGH CORP	10/03/88	200	27.125	56.75	5,493.60	11,350.00	5,856.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.01	16,000.00	18,010.00	2,010.00
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	43.375	10,997.67	13,012.50	2,014.83
Total value					$ 70,126.37	$ 271,102.50 **	$ 200,976.13

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 132,851.50	$ 852.33	$ 5,716.47
Total	$ 132,851.50	$ 852.33	$ 5,716.47

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.25 % to 8.25 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Client Statement

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 202,182.50
Mutual funds	18,440.00
Margin account balance	-142,096.82
Other investments	31,205.35
Net value this period	$ 189,709.03
Net value last period	$ 174,183.70

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 104.00	$ 1,621.82	$ 0.00
Total	$ 104.00	$ 1,621.82	$ 0.00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 34.02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 0.00	$ 9,095.70
Unrealized gain or (loss)	217,371.15	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -132,851.60
Securities bought and other subtractions		-8,742.48	
Securities sold and other additions	0.00		
Withdrawals		0.00	
Interest charged on loans		-608 84	
Gold Card payment/credit adjustment		0 00	
Checks written		0 00	
Dividends credited	104 00		
Total	$ 104 00	$ -9,351 32	
Closing cash balance			$ -142,098 82

Cash	0.00
Margin account balance	-142,098.82

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 10/30/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 43.625	3.025%	$ 396.00	$ 13,087.50	2/M	Symbol: T\Rated: A-
AMGEN INC	OTC	3,300	66 75			220,275 00	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	36 375	274	50 00	18,187 50	2/H	Symbol: MCIC\Rated: B
OCCIDENTAL PETROLEUM CORP DEL	NYSE	200	17 00	5 882	200 00	3,400 00	3/M	Symbol: OXY\Rated: B-
SCHERING PLOUGH CORP	NYSE	200	62 375	2 501	312 00	12,475 00	1/M	Symbol: SGP\Rated: A
TEXAS INSTRUMENTS INC	NYSE	300	49 125	1 465	218 00	14,737 50	1/H	Symbol: TXN\Rated: B-
Total value of stocks					$ 1,174.00	$ 282,162 50		

*Please refer to the back of the statement for definitions of research rankings.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II — Account number 685-03367-17 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18.44		$ 18,440.00	In cash account
Total value of mutual funds				$ 18,440.00	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,351.96	$ 13,519.60	In cash account
S L FUTURES 1000 PLUS L P	15	1,179.05	17,685.75	In cash account
Total value of other investments			$ 31,205.35	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
10/27/92	Bought	AMGEN INC	130	$ 66.50	$ -8,742.48
Total securities bought and other subtractions					$ -8,742.48
Total securities sold and other additions					$ 0.00

Interest charged on loans

Date	Description	Amount
10/21/92	INTEREST CHARGED FOR 30 DAY(S) FROM 9/21 THRU 10/20 @ 5 1/2% CLOSING BALANCE 132,747 AVERAGE BALANCE 132,837	$ 608.84

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
10/15/92	OCCIDENTAL PETROLEUM CORP-DEL	CASH DIV ON 200 SHS RECORD 09/10/92 PAY 10/15/92	$ 50.00		$ 50.00
10/19/92	TEXAS INSTRUMENTS INC	CASH DIV ON 300 SHS RECORD 10/01/92 PAY 10/19/92	54.00		54.00
Total dividends earned			$ 104.00	$ 0.00	$ 104.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 43.625		$ 4,362.50	Not available
	02/24/84	200	17.37	43.625	3,544.00	8,725.00	5,181.00 #
AMGEN INC	01/10/89	300	5.541	66.75	1,662.50	20,025.00	18,362.50 #
	02/01/89	1,200	8.416	66.75	7,700.00	80,100.00	72,400.00
	03/15/89	170	6.958	66.75	1,182.92	11,347.50	10,164.58
	06/02/89	1,200	7.375	66.75	8,850.00	80,100.00	71,250.00
	05/21/90	300	12.041	66.75	3,662.50	20,025.00	16,362.50
	10/20/92	130	66.50	66.75	8,742.48	8,677.50	(64.98)
MCI COMMUNICATIONS CORP	01/18/84	200	15.12	36.375	3,025.00	7,275.00	4,250.00 #
	02/11/86	300	13.37	36.375	4,012.50	10,912.50	6,900.00 #
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	19.50	17.00	3,985.68	3,400.00	(585.68)
SCHERING PLOUGH CORP	10/03/88	200	27.125	62.375	5,493.60	12,475.00	6,981.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.44	16,000.00	18,440.00	2,440.00
TEXAS INSTRUMENTS INC	01/30/91	300	36.125	49.125	10,997.67	14,737.50	3,739.83
Total value					$ 78,868.85	$ 296,240.00 **	$ 217,371.16

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 142,098.82	$ 608.84	$ 6,327.31
Total	$ 142,098.82	$ 608.84	$ 6,327.31

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 8.00 % to 8.00 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client FMA Statement

November 1 - November 30, 1992

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 310,343.75
Mutual funds	18,480.00
Margin account balance	-134,373.17
Other investments	31,199.75
Net value this period	$ 225,630.33
Net value last period	$ 199,709.03

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 413.00	$ 2,034.82	$ 0.00
Cap gains distributions	674.00	674.00	0.00
Total	$ 1,087.00	$ 2,708.82	$ 0.00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 34.02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 1,841.16	$ 10,936.86
Unrealized gain or (loss)	250,721.24	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

Nov. 30, 1992

CONGRESSMAN NICK JOE RAHALL II

Account number 865-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -142,098 82
Securities bought and other subtractions		0 00	
Securities sold and other additions	7,340 00		
Withdrawals		0 00	
Interest charged on loans		-701 35	
Gold Card payment/credit adjustment		0 00	
Checks written		0 00	
Dividends credited	413 00		
Capital gains distributions credited	674 00		
Total	$ 8,427 00	$ -701 35	
Closing cash balance			$ -134,373 17

Cash	0 00
Margin account balance	-134,373.17

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 11/30/92.

Stocks

Common stocks	Exchange	No of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 47 125	2 801%	$ 396 00	$ 14,137.50	2/M	Symbol: T\Rated: A-
AMGEN INC	OTC	3 300	76 75			253,275 00	1/M	Symbol AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	500	37 375	267	50 00	18,687 50	2/H	Symbol: MCIC\Rated B
OCCIDENTAL PETROLEUM CORP DEL	NYSE	200	17 875	5 594	200 00	3,575 00	3/M	Symbol: OXY\Rated B-
SCHERING PLOUGH CORP	NYSE	200	66 50	2 345	312 00	13,300 00	1/M	Symbol: SGP\Rated: A
TEXAS INSTRUMENTS INC	NYSE	150	49 125	1 465	108 00	7,368 75	1/H	Symbol: TXN\Rated: B-
Total value of stocks					$ 1,066 00	$ 310,343 75		

*Please refer to the back of the statement for definitions of research rankings

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client FMA Statement

November 30, 1992

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18 46		$ 18,460.00	In cash account
Total value of mutual funds				**$ 18,460.00**	

Other investments

Description	No of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,344 23	$ 13,442 30	In cash account
S L FUTURES 1000 PLUS L P	15	1,183 83	17,757.45	In cash account
Total value of other investments			**$ 31,199.75**	

Investment activity

Transaction details

Date	Activity	Description	Quantity	Price	Amount
11/17/92	Sold	TEXAS INSTRUMENTS INC	-100	$ 49 75	$ 4,893 33
11/17/92	Sold	TEXAS INSTRUMENTS INC	-50	49 75	2,446 67
Total securities bought and other subtractions					**$ 0 00**
Total securities sold and other additions					**$ 7,340.00**

Interest charged on loans

Date	Description	Amount
11/23/92	INTEREST CHARGED FOR 33 DAY(S) FROM 10/21 THRU 11/22 @ 5 1/2% CLOSING BALANCE 134,859 AVERAGE BALANCE 139,111	$ 701 35

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
11/02/92	AMERICAN TEL & TEL CO	CASH DIV ON 300 SHS RECORD 09/30/92 PAY 11/02/92	$ 99 00		$ 99 00
11/27/92	SMALLCAP WORLD FUND INC	CASH DIV ON 1000 0000 SHS RECORD 11/20/92 PAY 11/23/92	80.00		80.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Consolidated Client Fund Statement

December 31, 1992

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Dividends
continued

Date	Description	Comment	Taxable	Non-taxable	Amount
11/27/92	SMALLCAP WORLD FUND INC	CAP GNS ON 1000.0000 SHS RECORD 11/20/92 PAY 11/23/92	$ 156.00		$ 156.00
11/30/92	SCHERING PLOUGH CORP	CASH DIV ON 200.0000 SHS RECORD 11/06/92 PAY 11/30/92	78.00		78.00
Total dividends earned			$ 413.00	$ 0.00	$ 413.00

Capital gains distributions

Date	Description	Comment	Taxable	Non-taxable	Amount
11/27/92	SMALLCAP WORLD FUND INC	CAP GNS ON 1000.0000 SHS RECORD 11/20/92 PAY 11/23/92	$ 674.00		$ 674.00
Total income from capital gains distributions			$ 674.00	$ 0.00	$ 674.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
TEXAS INSTRUMENTS INC	01/30/91	11/09/92 Sold	100	$ 36.125	$ 49.75	$ 3,665.89	$ 4,893.33	$ 1,227.44
TEXAS INSTRUMENTS INC	01/30/91	11/09/92 Sold	50	36.125	49.75	1,832.95	2,446.67	613.72
Total realized gain or (loss)						$ 5,498.84	$ 7,340.00	$ 1,841.16

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 47.125		$ 4,712.50	Not available
	02/24/84	200	17.37	47.125	3,544.00	9,425.00	5,881.00 #
AMGEN INC	01/10/89	300	5.541	76.75	1,662.50	23,025.00	21,362.50 #
	02/01/89	1,200	6.416	76.75	7,700.00	92,100.00	84,400.00
	03/15/89	170	6.958	76.75	1,182.92	13,047.50	11,864.58
	06/02/89	1,200	7.375	76.75	8,850.00	92,100.00	83,250.00
	05/21/90	300	12.041	76.75	3,662.50	23,025.00	19,362.50
	10/20/92	130	66.50	76.75	8,742.48	9,977.50	1,235.02

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Combined Client FMV Statement
December 30, 1992

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
MCI COMMUNICATIONS CORP	01/18/84	200	$ 15.12	$ 37.375	$ 3,025.00	$ 7,475.00	$ 4,450.00 #
	02/11/86	300	13.37	37.375	4,012.50	11,212.50	7,200.00 #
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	19.50	17.875	3,995.68	3,575.00	(420.68)
SCHERING PLOUGH CORP	10/03/88	200	27.125	66.50	5,493.60	13,300.00	7,806.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	18.00	18.46	18,000.00	18,460.00	2,460.00
TEXAS INSTRUMENTS INC	01/30/91	150	36.125	49.125	5,498.83	7,368.75	1,869.92
Total value					$ 73,370.01	$ 324,091.25 **	$ 250,721.24

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 134,373.17	$ 701.35	$ 7,028.66
Total	$ 134,373.17	$ 701.35	$ 7,028.66

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 6.00 % to 8.00 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client FMA Statement

December 1 - December 31, 1992

CONGRESSMAN NICK JOE RAHALL II
216 MAIN STREET
BECKLEY WV 25801-4613

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-03367-17 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

CONGRESSMAN NICK J RAHALL III
JAMES T SHEPHERD

Account value

Stocks	$ 267,331 29
Mutual funds	18,950 00
Margin account balance	-131,387 31
Other investments	31,008 05
Net value this period	$ 206,901 99
Net value last period [illegible]	[illegible]

Borrowing potential

You can borrow against the value of your portfolio to buy additional securities or for other purposes. For more information, please call your Financial Consultant.

Earnings summary

	This period	This year Taxable	This year Non-taxable
Dividends	$ 25 00	$ 2,059 82	$ 0.00
Cap gains distributions	0 00	674 00	0 00
Total	$ 25 00	$ 2,733 82	$ 0 00

Additional summary information

	This period	This year
FRGN tax withheld	$ 0.00	$ 34.02

Gain/loss summary

	This period	This year
Realized gain or (loss)	$ 2,212 50	$ 13,149.36
Unrealized gain or (loss)	229,323.74	*Not applicable*

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Portfolio Activity Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ -134,373.17
Securities bought and other subtractions		0.00	
Securities sold and other additions	3,725.00		
Withdrawals		0.00	
Interest charged on loans		-774.14	
Gold Card payment/credit adjustment		0.00	
Checks written		0.00	
Dividends credited	25.00		
Total	$ 3,750.00	$ -774.14	
Closing cash balance			$ -131,397.31

Cash	0.00
Margin account balance	-131,397.31

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMERICAN TEL & TEL CO	NYSE	300	$ 51.00	2.588%	$ 396.00	$ 15,300.00	2/M	Symbol: T\Rated: A-
AMGEN INC	OTC	3,300	70.625			233,062.50	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	400	39.625	.252	40.00	15,850.00	2/H	Symbol: MCIC\Rated: B
OCCIDENTAL PETROLEUM CORP DEL	NYSE	200	17.00	5.882	200.00	3,400.00	3/M	Symbol: OXY\Rated: B-
SCHERING PLOUGH CORP	NYSE	200	63.625	2.451	312.00	12,725.00	1/M	Symbol: SGP\Rated: A
TEXAS INSTRUMENTS INC	NYSE	150	46.625	1.544	108.00	6,993.75	1/H	Symbol: TXN\Rated: B-
Total value of stocks					$ 1,068.00	$ 287,331.25		

*Please refer to the back of the statement for definitions of research rankings

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account Activity FMV Statement

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SMALLCAP WORLD FUND INC	1,000	$ 18.95		$ 18,950.00	In cash account
Total value of mutual funds				$ 18,950.00	

Other investments

Description	No. of shares	Price	Market value	Comment
F-1000 GUARANTEE FUTURES II LP	10	$ 1,331.75	$ 13,317.50	In cash account
S L FUTURES 1000 PLUS L P	15	1,179.37	17,690.55	In cash account
Total value of other investments			$ 31,008.05	

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
12/18/92	Sold	MCI COMMUNICATIONS CORP	-100	$ 37.25	$ 3,725.00
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 3,725.00

Interest charged on loans

Date	Description	Amount
12/21/92	INTEREST CHARGED FOR 28 DAY(S) FROM 11/23 THRU 12/20 @ 5 1/2% CLOSING BALANCE 130,623 AVERAGE BALANCE 134,111	$ 573.70
12/31/92	INTEREST CHARGED FOR 10 DAY(S) FROM 12/21 THRU 12/30 @ 5 1/2% CLOSING BALANCE 131,196 AVERAGE BALANCE 131,196	200.44
Total interest charged on loans		$ 774.14

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03367-17 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/07/92	MCI COMMUNICATIONS CORP	CASH DIV ON 500.0000 SHS RECORD 11/13/92 PAY 12/07/92	$ 25.00		$ 25.00
Total dividends earned			$ 25.00	$ 0.00	$ 25.00

Gain/loss details

Please note, this material is being prepared for informational purposes only and should not be used for tax preparation without the assistance of your tax advisor.

Realized gain or loss

Description	Original trade date	Closing trade date	Quantity	Purchase price	Sale price	Cost basis	Proceeds	Realized gain or (loss)
MCI COMMUNICATIONS CORP	01/18/84	12/11/92 Sold	100	$ 15.12	$ 37.25	$ 1,512.50	$ 3,725.00	$ 2,212.50 #
Total realized gain or (loss)						$ 1,512.50	$ 3,725.00	$ 2,212.50

#Based on information supplied by your Financial Consultant.

Unrealized gain or loss

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
AMERICAN TEL & TEL CO		100	Please provide	$ 51.00		$ 5,100.00	Not available
	02/24/84	200	17.37	51.00	3,544.00	10,200.00	6,656.00 #
AMGEN INC	01/10/89	300	5.541	70.625	1,662.50	21,187.50	19,525.00 #
	02/01/89	1,200	6.416	70.625	7,700.00	84,750.00	77,050.00
	03/15/89	170	6.958	70.625	1,182.92	12,006.25	10,823.33
	06/02/89	1,200	7.375	70.625	8,850.00	84,750.00	75,900.00
	05/21/90	300	12.041	70.625	3,662.50	21,187.50	17,525.00
	10/20/92	130	66.50	70.625	8,742.46	9,181.25	438.77
MCI COMMUNICATIONS CORP	01/18/84	100	15.12	39.625	1,512.50	3,962.50	2,450.00 #
	02/11/86	300	13.37	39.625	4,012.50	11,887.50	7,875.00 #
OCCIDENTAL PETROLEUM CORP-DEL	07/07/92	200	19.50	17.00	3,995.68	3,400.00	(595.68)

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

CONGRESSMAN NICK JOE RAHALL II

Account number 685-03387-17 240

Unrealized gain or loss *continued*

Description	Original trade date	Quantity	Purchase price	Market price	Cost basis	Market value	Unrealized gain or (loss)
SCHERING PLOUGH CORP	10/03/88	200	$ 27.125	$ 63.625	$ 5,493.60	$ 12,725.00	$ 7,231.40
SMALLCAP WORLD FUND INC	04/20/90	1,000	16.00	18.95	16,000.00	18,950.00	2,950.00
TEXAS INSTRUMENTS INC	01/30/91	150	38.125	46.625	5,498.63	6,993.75	1,494.92
Total value					$ 71,857.51	$ 301,181.26**	$ 229,323.74

#Based on information supplied by your Financial Consultant.

**Only items with cost basis are included in this total.

Credit resources

Please retain this information for your records.

Existing loans

Item	Amount owed	Interest charged this period	Interest charged this year
Margin loan	$ 131,397.31	$ 774.14	$ 7,802.80
Total	$ 131,397.31	$ 774.14	$ 7,802.80

Borrowing potential

You can borrow on margin against the value of your portfolio to buy additional securities or for any purpose. With Express Credit you may borrow an even greater amount for any personal or business use. Express Credit may not be used to purchase, carry or trade in securities.

The interest rate we charge on the borrowed money depends on several factors, including how much is borrowed. Last period's average borrowing rate was from 8.00 % to 8.00 %. Amounts borrowed on margin decrease the amount you can borrow for other purposes.

Important Administrative Notice. Effective February 15, 1993, we will assess a $50 charge for any account closed when assets are transferred to another financial institution. This fee will cover related costs incurred by this transfer.

COLONIAL
Mutual Funds

COLONIAL US FUND FOR GROWTH CLASS B

PERIOD ENDING 10/16/92

ACCOUNT NUMBER 079-7900003526
TAX ID NUMBER 232-06-2218

ACCOUNT STATEMENT

FOR ACCOUNT SERVICE CALL COLONIAL
1-800-345-6611

REP: RAHALL
WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

#6

NICK JOE RAHALL II CUST
REBECCA A RAHALL
UNIF GIFT MIN ACT WV
110 1/2 MAIN STREET
BECKLEY WV 25801-4611

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF NOT PLEASE CALL COLONIAL OR CONTACT YOUR REPRESENTATIVE.

YOUR ACCOUNT TRANSACTIONS

TRANSACTION DATE	TYPE OF TRANSACTION	$ AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES
	BEGINNING BALANCE				0.0
07/24	PURCHASE THROUGH DEALER	5000 00	10.14	493.097	493.0

YEAR-TO-DATE ACCOUNT SUMMARY

INCOME DIVS PAID	CAP GAINS PAID	SHARES ON DEPOSIT WITH COLONIAL	+ CERTIFICATE SHARES HELD BY YOU	= TOTAL SHARES YOU OWN
$0.00	$0.00	493.097	0.000	493.097

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COLONIAL
Mutual Funds

US FUND FOR GROWTH CLASS B
CONFIRMATION DATE 07/31/92
ACCOUNT NUMBER 079 7900003526
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65400700

NICK JOE RAHALL II AS CUST FOR
REBECCA A RAHALL UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	$ AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
07/24	PURCHASE THROUGH DEALER	5,000.00			10.14	493.097	493.097

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	493.097	0.000	493.09

AGENT: COLONIAL INVESTORS SERVICE CENTER, P.O. BOX 1722, BOSTON, MA 02105-1722

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STATEMENT DATE
2/20/92

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924.

NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402575

SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,942.011
1/17	1/08	INCOME REINVEST	.062	182.40	7.07	25.789	2,967.810
2/20	2/06	INCOME REINVEST	.059	175.10	6.88	25.414	2,993.224
2/20	3/04	INCOME REINVEST	.059	175.80	6.78	25.047	3,018.271

PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR IMPORTANT DIVIDEND INFORMATION PERTAINING TO YOUR ACCOUNT.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS	.00		
REINVEST	REINVEST	DIVIDENDS	534.10	CERTIFICATE SHARES:	.000
		CAPITAL GAINS	.00	SHARES ON DEPOSIT:	3,018.271
				TOTAL SHARES OWNED:	3,018.271

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
3/18/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALL CUST
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WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402575
SOCIAL SECURITY OR TAX ID NUMBER 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					2,942.011
1/17	1/06	INCOME REINVEST	.062	182 40	7 07	25.789	2,967.810
2/20	2/06	INCOME REINVEST	.059	175.10	6.89	25.414	2,993.224
3/20	3/04	INCOME REINVEST	.059	175.60	6.75	25.047	3,019.271
3/19	3/18	REDEMPTION THRU DLR	908077	20,259.31	6.71	3,019.271	0.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS:	534.10	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	.000
				TOTAL SHARES OWNED:	.000

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

PLEASE DETACH AND REMIT WITH NEXT INVESTMENT

STATEMENT DATE
2/20/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALL CUST
REBECCA A RAHALL
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25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575

SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				2,842.011
1/17	1/08	INCOME REINVEST 082	182.40	7.07	25.799	2,867.810
2/20	2/06	INCOME REINVEST 089	175.10	6.88	25.414	2,893.224

PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR IMPORTANT DIVIDEND INFORMATION PERTAINING TO YOUR ACCOUNT.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	DIVIDENDS:	367.50	SHARES ON DEPOSIT:	2,893.224
		CAPITAL GAINS:	.00	TOTAL SHARES OWNED:	2,893.224

LETTER OF INTENT SUMMARY

STATEMENT DATE
1/24/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALL CUST
REBECCA A RAHALL
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402575
SOCIAL SECURITY OR TAX ID NUMBER: 232-06-2218

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				2,842.011
1/17	1/08	INCOME REINVEST	182.40	7.07	28.799	2,867.810

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS	
DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

CURRENT YEAR ACTIVITY	
INVESTMENTS:	.00
DIVIDENDS:	182.40
CAPITAL GAINS:	.00

YOUR SHARE BALANCE	
CERTIFICATE SHARES:	.000
SHARES ON DEPOSIT:	2,867.810
TOTAL SHARES OWNED:	2,867.810

LETTER OF INTENT SUMMARY

COLONIAL Mutual Funds

COLONIAL US FUND FOR GROWTH CLASS B

PERIOD ENDING 10/16/92

ACCOUNT NUMBER 079-7900002896
TAX ID NUMBER 233-17-4890

ACCOUNT STATEMENT

FOR ACCOUNT SERVICE CALL COLONIAL
1-800-345-6611

REP: RAHALL
WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT MIN ACT WV
110 1/2 MAIN STREET
BECKLEY WV 25801-4611

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF NOT PLEASE CALL COLONIAL OR CONTACT YOUR REPRESENTATIVE.

YOUR ACCOUNT TRANSACTIONS

TRANSACTION DATE	TYPE OF TRANSACTION	$ AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES
	BEGINNING BALANCE				0.000
07/22	PURCHASE THROUGH DEALER	10000.00	10.10	990.099	990.099

YEAR-TO-DATE ACCOUNT SUMMARY

INCOME DIVS PAID	CAP. GAINS PAID	SHARES ON DEPOSIT WITH COLONIAL	+	CERTIFICATE SHARES HELD BY YOU	=	TOTAL SHARES YOU OWN

3167

COLONIAL
Mutual Funds

COLONIAL US GOVERNMENT FUND CLASS A

PERIOD ENDING 10/18/92

ACCOUNT NUMBER 777-9770335801
TAX ID NUMBER 233-17-4890

ACCOUNT STATEMENT

FOR ACCOUNT SERVICE CALL COLONIAL
1-800-345-6611

REP: RAHALL
WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF NOT PLEASE CALL COLONIAL OR CONTACT YOUR REPRESENTATIVE.

YOUR ACCOUNT TRANSACTIONS

TRANSACTION DATE	TYPE OF TRANSACTION	$ AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES
	BEGINNING BALANCE				0.000
03/18	PURCHASE THROUGH DEALER	25000.00	7.29	3448.276	3448.276
04/06	DIV REINVEST $0.0498/SHR	49.58	6.94	7.140	3455.416
05/06	DIV REINVEST $0.0498/SHR	170.86	6.92	24.708	3480.124
06/04	DIV REINVEST $0.0498/SHR	172.07	6.94	24.794	3504.918
07/07	DIV REINVEST $0.0470/SHR	164.61	7.00	23.516	3528.434
08/06	DIV REINVEST $0.0470/SHR	165.62	6.94	23.865	3552.299
09/04	DIV REINVEST $0.0470/SHR	166.78	6.96	23.963	3576.262
10/06	DIV REINVEST $0.0470/SHR	167.87	6.97	24.088	3600.361

YEAR-TO-DATE ACCOUNT SUMMARY

INCOME DIVS PAID	CAP GAINS PAID	SHARES ON DEPOSIT WITH COLONIAL	+	CERTIFICATE SHARES HELD BY YOU	=	TOTAL SHARES YOU OWN

3168

COLONIAL
Mutual Funds

US FUND FOR GROWTH CLASS B
CONFIRMATION DATE 07/29/92
ACCOUNT NUMBER 079 7900002896
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65400350

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	$ AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
07/22	PURCHASE THROUGH DEALER	10,000.00			10.10	990.099	990.099

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	990.099	0.000	990.099

AGENT: COLONIAL INVESTOR PLAN

COLONIAL Mutual Funds

COLONIAL U.S. GOVERNMENT FUND CLASS A

CONFIRMATION DATE 07/09/92

ACCOUNT NUMBER 777-9770335801
TAX ID NUMBER 233-17-4890

ACCOUNT STATEMENT

FOR ACCOUNT SERVICE CALL COLONIAL
1-800-345-6611

REP: RAHALL
WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF NOT PLEASE CALL COLONIAL OR CONTACT YOUR REPRESENTATIVE.

YOUR ACCOUNT TRANSACTIONS

TRANSACTION DATE	TYPE OF TRANSACTION	$ AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES
	BEGINNING BALANCE				0.000
03/18	PURCHASE THROUGH DEALER	25000.00	7.25	3448.276	3448.276
04/08	DIV REINVEST $0.0495/SHR	49.85	8.94	7.140	3455.416
05/08	DIV REINVEST $0.0495/SHR	170.88	8.92	24.708	3480.124
06/04	DIV REINVEST $0.0485/SHR	172.07	8.94	24.794	3504.918
07/07	DIV REINVEST $0.0470/SHR	164.81	7.00	23.516	3528.434

YEAR-TO-DATE ACCOUNT SUMMARY

INCOME DIVS PAID	CAP. GAINS PAID	SHARES ON DEPOSIT WITH COLONIAL	+ CERTIFICATE SHARES HELD BY YOU	= TOTAL SHARES YOU OWN
557.21	0.00	3,528.434	- ---	

COLONIAL
Group of
Mutual Funds

000044995

STATEMENT DATE: 03/31/92
STATEMENT ACCOUNT NO: 777-9770335801
SHAREHOLDER NAME: RAHALL NICK JOE C/F

SHAREHOLDER:

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4698

YOUR FINANCIAL SERVICES FIRM IS:

WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

DEALER BRANCH 3648WV-BK
REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER CLIENT NUMBER 65400350

TO MAKE AN ADDITIONAL PURCHASE IN ANY OF YOUR COLONIAL ACCOUNTS, PLEASE COMPLETE THE REVERSE SIDE OF THIS STUB AND MAIL IT WITH YOUR CHECK PAYABLE TO THE FUND OF YOUR CHOICE.

ACCOUNT SUMMARY AS OF MARCH 31 1992

FUND NAME	ACCOUNT NUMBER	ACCOUNT NAME	NET ASSET VALUE	SHARE BALANCE
U.S. GOVERNMENT TRUST	777-9770335801	RAHALL NICK JOE C/F	$6.94	3448.276

ACCOUNT ACTIVITY SUMMARY

DATE	TRANSACTION	TRANSACTION AMOUNT	FEE	TAX W/HELD	SHARE PRICE	NUMBER OF SHARES THIS TRANSACTION	TOTAL
U.S. GOVERNMENT TRUST 777-9770335801 TAX ID: 233-17-4980 NICK JOE RAHALL II AS CUST FOR NICK JOE RAHALL III UNDER THE WV GIFTS TO MINORS ACT							
						BEGINNING BALANCE	.000
03/16	PURCHASE THROUGH DEALER	25000.00			7.25	3448.276	3448.276
						TOTAL SHARES:	3448.276

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COLONIAL
Mutual Funds

U.S. GOVERNMENT TRUST

PAGE: 1
CONFIRMATION DATE 03/25/92
ACCOUNT NUMBER 777 9770335801
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65400350

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
03/18	PURCHASE THROUGH DEALER	28,000.00			7.28	3,448.278	3,448.278

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	3,448.276	0.000	3,448.276

3172

COLONIAL
Mutual Funds

U.S. GOVERNMENT TRUST

CONFIRMATION DATE 03/24/92
ACCOUNT NUMBER 777 9770335801
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65400350

NICK JOE RAHALL II AS CUST FOR
NICK JOE RAHALL III UNDER THE
WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
03/18	PURCHASE THROUGH DEALER	28,000.00			7.28	3,448.276	3,448.276

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	3,448.276	0.000	3,448.276

STATEMENT DATE
3/20/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALL II CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402578

SOCIAL SECURITY OR TAX ID NUMBER: 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					4,428.218
1/17	1/06	INCOME REINVEST	.062	274.43	7.07	38.818	4,466.036
2/20	2/05	INCOME REINVEST	.059	263.44	6.89	38.235	4,503.270
3/20	3/04	INCOME REINVEST	.059	255.69	6.76	38.187	4,542.457

PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR IMPORTANT DIVIDEND INFORMATION PERTAINING TO YOUR ACCOUNT.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS:	802.68	CERTIFICATE SHARES:	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	4,542.457
				TOTAL SHARES OWNED:	4,542.457

LETTER OF INTENT SUMMARY

3174

STATEMENT DATE
3/19/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402578
SOCIAL SECURITY OR TAX ID NUMBER: 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				4,425.219
1/17	1/06	INCOME REINVEST .082	374.43	7.07	38.818	4,465.038
2/20	2/06	INCOME REINVEST .080	263.44	8.08	38.235	4,503.270
3/20	3/04	INCOME REINVEST .080	285.08	8.79	38.187	4,542.457
3/18	3/16	REDEMPTION THRU DLR 808078	30,479.88	8.71	4,542.457	0.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS	
DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

CURRENT YEAR ACTIVITY	
INVESTMENTS:	.00
DIVIDENDS:	803.58
CAPITAL GAINS:	.00

YOUR SHARE BALANCE	
CERTIFICATE SHARES:	.000
SHARES ON DEPOSIT:	.000
TOTAL SHARES OWNED:	.000

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I.	PAID TO DATE	EXPIRATION DATE

3175

STATEMENT DATE
2/20/92

MFS GOVERNMENT INCOME PLUS TRUST

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NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV

25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER 31 ACCOUNT NUMBER 8182402578

SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME RAHALL
REPRESENTATIVE NUMBER BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					4,428.218
1/17	1/05	INCOME REINVEST	.062	274.43	7.07	38.816	4,466.036
2/20	2/05	INCOME REINVEST	.059	263.44	6.89	38.236	4,503.270

PLEASE REFER TO THE BACK OF YOUR STATEMENT FOR IMPORTANT DIVIDEND INFORMATION PERTAINING TO YOUR ACCOUNT.

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS	
DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

CURRENT YEAR ACTIVITY	
INVESTMENTS:	.00
DIVIDENDS:	537.87
CAPITAL GAINS:	.00

YOUR SHARE BALANCE	
CERTIFICATE SHARES:	.000
SHARES ON DEPOSIT:	4,503.270
TOTAL SHARES OWNED:	4,503.270

LETTER OF INTENT SUMMARY

STATEMENT DATE
1/24/92

MFS GOVERNMENT INCOME PLUS TRUST

MFS
Helping investors manage money since 1924

NICK JOE RAHALLII CUST
NICK JOE RAHALL III
UNIF GIFT TO MIN ACT - WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 31 ACCOUNT NUMBER: 8182402578
SOCIAL SECURITY OR TAX ID NUMBER 233-17-4890

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				4,428.219
1/17	1/08	INCOME REINVEST	274.43	7.07	38.816	4,465.035

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	DIVIDENDS:	274.43	SHARES ON DEPOSIT:	4,465.035
		CAPITAL GAINS:	.00	TOTAL SHARES OWNED:	4,465.035

LETTER OF INTENT SUMMARY

AMOUNT OF L.O.I. | PAID TO DATE | EXPIRATION DATE

3177

COLONIAL
Mutual Funds

U.S. GOVERNMENT FUND CLASS A
CONFIRMATION DATE 12/01/92
ACCOUNT NUMBER 777 9770480336
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65401050

NICK JOE RAHALL II AS CUST
SUZANNE NICOLE RAHALL
UNIF GIFTS MIN ACT WV
110 1/2 MAIN STREET
BECKLEY WV 25801-4611

DATE	TRANSACTION	$ AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
11/09	PURCHASE THROUGH DEALER	3,000.00			7.20	416.667	416.667
11/23	PURCHASE THROUGH DEALER	1,000.00			7.21	138.696	555.363

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	555.363	0.000	555.363

COLONIAL
Mutual Funds

U.S. GOVERNMENT FUND CLASS A
CONFIRMATION DATE 11/17/92
ACCOUNT NUMBER 777 9770480336
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65401050

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	$ AMOUNT	FEE	TAX W/H	PRICE	NO OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
11/09	PURCHASE THROUGH DEALER	3,000.00			7.20	416.667	416.667

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	416.667	0.000	416.667

AGENT: COLONIAL INVESTORS SERVICE CENTER. P.O. BOX 1722, BOSTON, MA 02105-1722

IMPORTANT INFORMATION
PLEASE USE THIS PORTION OF THE CONFIRMATION STATEMENT TO MAKE A SUBSEQUENT INVESTMENT INTO YOUR ACCOUNT.
BE SURE TO INDICATE THE FUND NAME AND ACCOUNT NUMBER ON YOUR CHECK.
ALL INVESTMENTS SHOULD BE MADE PAYABLE IN U.S. DOLLARS TO THE FUND SHOWN ON THIS STATEMENT AND MAILED TO THE ADDRESS ON THE REVERSE SIDE.

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF YOU HAVE ANY QUESTIONS, PLEASE CALL US AT 800-345-8811 OR CONTACT YOUR DEALER:

WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

U.S. GOVERNMENT FUND CLASS A
TAX IDENTIFICATION NUMBER 233-28-8877
CHECK HERE FOR ADDRESS CHANGE (SEE REVERSE) ___
AMOUNT ENCLOSED _____
TAX YEAR _____
ACCOUNT NUMBER 777 9770480336

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DEALER NO. 3848 WV-BK
BRANCH BECKLEY
REP NO. BK08
REP NAME RAHALL
CLIENT NO. 65401050

COLONIAL
Mutual Funds

COLONIAL US FUND FOR GROWTH CLASS B

PERIOD ENDING 10/16/92

ACCOUNT NUMBER 079-7900002366
TAX ID NUMBER 233-25-9977

ACCOUNT STATEMENT

FOR ACCOUNT SERVICE CALL COLONIAL
1-800-345-6611

REP: RAHALL
WHEAT FIRST SECURITIES INC
122 MAIN STREET
BECKLEY WV 25801

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

PLEASE VERIFY THAT ALL INFORMATION ON YOUR STATEMENT IS CORRECT. IF NOT PLEASE CALL COLONIAL OR CONTACT YOUR REPRESENTATIVE.

YOUR ACCOUNT TRANSACTIONS

TRANSACTION DATE	TYPE OF TRANSACTION	$ AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES
	BEGINNING BALANCE				0.000
07/20	PURCHASE THROUGH DEALER	4000.00	10.18	393.701	393.701

YEAR-TO-DATE ACCOUNT SUMMARY

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COLONIAL
Mutual Funds

US FUND FOR GROWTH CLASS B
CONFIRMATION DATE 07/27/92
ACCOUNT NUMBER 079 7900002366
DIVIDEND OPTION: REINVEST
CAPITAL GAIN OPTION: REINVEST
CLIENT NUMBER 65401050

NICK JOE RAHALL II AS CUST FOR
SUZANNE NICOLE RAHALL UNDER
THE WV GIFTS TO MINORS ACT
110 1/2 MAIN ST
BECKLEY WV 25801-4611

DATE	TRANSACTION	$ AMOUNT	FEE	TAX W/H	PRICE	NO. OF SHARES	TOTAL SHARES
	BEGINNING BALANCE						0.000
07/20	PURCHASE THROUGH DEALER	4,000.00			10.18	393.701	393.701

YEAR-TO-DATE				
DIVIDEND	GAIN/OTHER	SHARES ON DEPOSIT	CERTIFICATE SHARES	TOTAL SHARES
0.00	0.00	393.701	0.000	393.701

STATEMENT DATE
7/23/92

MFS WORLDWIDE TOTAL RETURN TRUST

MFS
The First Name in Mutual Funds · Since 1924

NICK JOE RAHALL II CUST FBO
SUZANNE NICOLE RAHALL
UNIF GIFTS TO MINORS ACT-WV
110 1/2 MAIN ST
BECKLEY WV 25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 24 ACCOUNT NUMBER: 0000900288

SOCIAL SECURITY OR TAX ID NUMBER: 233-25-9977

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE.

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					579.499
4/20	3/31	INCOME REINVEST	.08	48.36	8.50	4.721	584.230
7/20	6/30	INCOME REINVEST	.09	52.58	10.09	5.211	589.441
7/23	7/20	REDEMPTION THRU DLR	91698	6,047.66	10.25	589.441	0.000

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
		DIVIDENDS:	98.84	CERTIFICATE SHARES:	.000
REINVEST	REINVEST	CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	.000
				TOTAL SHARES OWNED:	.000

LETTER OF INTENT SUMMARY

AMOUNT OF L O I	PAID TO DATE	EXPIRATION DATE

STATEMENT DATE
7/20/92

MFS WORLDWIDE TOTAL RETURN TRUST

MFS
The First Name in Mutual Funds · Since 1924

NICK JOE RAHALL II CUST FBO
SUZANNE NICOLE RAHALL
UNIF GIFTS TO MINORS ACT-WV
110 1/2 MAIN ST
BECKLEY WV

25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 24 ACCOUNT NUMBER: 0000900288

SOCIAL SECURITY OR TAX ID NUMBER: 233-25-9977

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBERS ON ALL COMMUNICATIONS WITH SERVICE DESK

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BKOB
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION	DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD				879.498
4/20	3/31	INCOME REINVEST [redacted] 08	46.96	9.80	4.791	884.230
7/20	6/30	INCOME REINVEST [redacted] 08	52.58	10.08	5.211	889.441

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS	
DIVIDENDS	CAPITAL GAINS
REINVEST	REINVEST

CURRENT YEAR ACTIVITY	
INVESTMENTS:	.00
DIVIDENDS:	98.94
CAPITAL GAINS:	.00

YOUR SHARE BALANCE	
CERTIFICATE SHARES:	.000
SHARES ON DEPOSIT:	889.441
TOTAL SHARES OWNED:	889.441

LETTER OF INTENT SUMMARY

STATEMENT DATE
4/20/92

MFS WORLDWIDE TOTAL RETURN TRUST

MFS
Helping investors manage money since 1924

NICK JOE RAHALL II CUST FBO
SUZANNE NICOLE RAHALL
UNIF GIFTS TO MINORS ACT-WV
110 1/2 MAIN ST
BECKLEY WV

25801-4698

WHEAT FIRST SECURITIES INC
122 MAIN ST
P O BOX 1328
BECKLEY WV 25802-1328

FUND NUMBER: 24 ACCOUNT NUMBER: 0000900288

SOCIAL SECURITY OR TAX ID NUMBER: 233-25-9977

PLEASE REFER TO YOUR FUND AND ACCOUNT NUMBER IN ALL COMMUNICATIONS. SEE REVERSE SIDE

REPRESENTATIVE NAME: RAHALL
REPRESENTATIVE NUMBER: BK08
DEALER-BRANCH: 23580-132

ACCOUNT ACTIVITY

CONFIRM DATE	TRADE DATE	TRANSACTION		DOLLAR AMOUNT	PRICE PER SHARE	SHARES THIS TRANSACTION	TOTAL SHARES OWNED
		BALANCE FORWARD					579.499
4/20	3/31	INCOME REINVEST	.08	48.38	8.80	4.731	584.230

SUMMARY OF YOUR ACCOUNT

YOUR DISTRIBUTION OPTION IS		CURRENT YEAR ACTIVITY		YOUR SHARE BALANCE	
DIVIDENDS	CAPITAL GAINS	INVESTMENTS:	.00		
REINVEST	REINVEST	DIVIDENDS:	48.38	CERTIFICATE SHARES:	.000
		CAPITAL GAINS:	.00	SHARES ON DEPOSIT:	584.230
				TOTAL SHARES OWNED:	584.230

LETTER OF INTENT SUMMARY

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

For the period December 1, 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

SS # 236-78-8645
Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-60527-14 240
As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 422 97
Mutual funds	8,535 28
Unit investment trusts	3,302 09
Direct investments	(see Portfolio details)
Net value this period	$ 12,260 32
Net value last period	$ 11,790.84

Earnings summary

	This period	This year
Dividends	$ 57 51	$ 57 51
Money funds earnings	.58	.58
Total	$ 58 09	$ 58 09

Additional summary information

	This period	This year
Other Income	$ 57.52	$ 57.52

Bulletin board

What's Ahead For 1992? We believe that a "new economic order" will present unique challenges and opportunities to investors. As 1992 unfolds, will interest rates continue to fall? Will stock prices continue to rise? Ask your Financial Consultant for a copy of our new report, "Investing In The '90s: A New Economic Order 1992."

Are You Adequately Preparing For Your Financial Future? Everyone under the age of 70 1/2 with earned income can contribute up to $2,000 to an IRA each year on a tax deferred basis. If you haven't made your contribution yet, do it now. This is also the time to consolidate any IRAs you may have elsewhere. Ask your Financial Consultant for an IRA transfer form.

#7

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-60527-14 240

Combined cash and money funds balance

Combined opening cash and money funds balance			$ 364.60
	Amounts added	Amounts subtracted	
Securities bought and other subtractions		-16.45	
Automatic reinvestments		-40.79	
Securities sold and other additions	0.00		
Dividends credited	57.51		
Money funds earnings reinvested	.58		
Other income credited	57.52		
Total	$ 115.61	$ -57.24	
Combined closing cash and money funds balance			$ 422.97

Money funds $ 422.97

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 01/31/92.

Money funds

Description	No. of shares	Market value	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	422.97	$ 422.97	4.675%	Accrued dividends of $ 0.98
Total value of money funds		$ 422.97		

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 885-60527-14 240

Mutual funds

Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 13.93	$ 4,160.03	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	375.632	10.67	4,007.99	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	27.779	13.22	367.24	
Total value of mutual funds			$ 8,535.26	

Unit investment trusts

Description	No of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT	2,689	$ 1.228			$ 3,302.09	
Total value of unit investment trusts				$ 0.00	$ 3,302.09	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-60527-14 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
01/06/92	Reinvest	UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT UIT DIV/INT REINVESTMENT FULL PRICE IS 1.17526000	14	$ 1.175	$ -16.45
Total securities bought and other subtractions					**$ -16.45**
Total securities sold and other additions					**$ 0.00**

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
01/31/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.487	$ 10.67	$ -37.21
01/31/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.271	13.22	-3.58
Total automatic reinvestments				**$ -40.79**

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

[illegible] tax statement

Account number 685-60527-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
01/08/92	UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT CASH DIV ON 2675 SHS RECORD 12/31/91 PAY 01/05/92	$ 16.72			$ 16.72
01/31/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 01/24/92 PAY 01/31/92	37.21			37.21
01/31/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 01/24/92 PAY 01/31/92	3.58			3.58
Total dividends earned		$ 57.51	$ 0.00		$ 57.51

Money funds earnings

Date	Description	Taxable	Non-taxable	Comment	Amount
01/10/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND FOR PERIOD 1/1/92 - 1/12/92. 12 DAYS AVERAGE YIELD 4.74%.	$ .58		Reinvested	$ .58
Total money funds earnings		$ .58	$ 0.00		$ .58

Other income

Date	Description	Comment	Amount
01/22/92	BALCOR EQUITY PEN INV III DISTRIBUTION 13251846861066		$ 26.64
01/22/92	BALCOR EQUITY PENSION INV II DISTRIBUTION 13251846833591		30.88
Total other income			$ 57.52

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Account number 685-60527-14 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 364 63
01/07/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	.27	.27
01/23/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	57.52	57.52
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	.58	.58
	Closing money funds balance			$ 422 97

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client IRA Statement

Period ... March ... 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 1-800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 425 93
Accrued Money Fund Dividends	68
Mutual funds	8,790 92
Unit investment trusts	3,264 45
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,481 98**
Net value last period	**$ 12,260 32**

Earnings summary

	This period	This year
Dividends	$ 78 66	$ 136 17
Money funds earnings	2 96	3 54
Total	**$ 81.62**	**$ 139 71**

Additional summary information

	This period	This year
Other income	$ 0.00	$ 57 52

Bulletin board

Are Your Mutual Funds Meeting Your Needs?
Our unique Mutual Funds Evaluation Service can help you evaluate your mutual funds' performance using objective information from CDA Technologies, Inc. Call your Financial Consultant for a complimentary personalized analysis.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Combined Cash & IRA Statement

***NICK JOE RAHALL II

Account number 685-60S27-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 422 97
Automatic reinvestments		-78.66	
Dividends credited	78 66		
Money funds earnings reinvested	2 96		
Total	$ 81 62	$ -78 66	
Combined closing cash and money funds balance			$ 425 93

Money funds 425.93

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0 00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 03/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	425 93	$ 425 93	$ .66	3.823%	
Total value of money funds		$ 425 93	$ .66		

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Personal Client Re Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 14.15	$ 4,225.73	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	382.221	10.94	4,181.50	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	28.296	13.56	383.69	
Total value of mutual funds			$ 8,790.92	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT	2,880	$ 1.214	.514%	$ 16.81	$ 3,264.45	
Total value of unit investment trusts				$ 16.81	$ 3,264.45	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
02/28/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.292	$ 10.84	$ -35.69
02/28/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.259	13.42	-3.47

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

***NICK JOE RAHALL II

Account number 685-60527-14 240

Investment activity *continued*

Automatic reinvestments

Date	Description	Quantity	Price	Amount
03/27/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.297	$ 10.92	$ -36.00
03/27/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.258	13.55	-3.50
Total automatic reinvestments				$ -78 68

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Taxable	Non-taxable	Comment	Amount
02/28/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 02/21/92 PAY 02/28/92	$ 35 69			$ 35 69
02/28/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 02/21/92 PAY 02/28/92	3.47			3.47
03/27/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND CASH DIV RECORD 03/20/92 PAY 03/27/92	36.00			36.00
03/27/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND CASH DIV RECORD 03/20/92 PAY 03/27/92	3 50			3.50
Total dividends earned		$ 78 68	$ 0 00		$ 78 68

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Primary Office for Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
02/14/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 01/13/92-02/17/92 36 DAYS AVERAGE YIELD 4.24 %.	$ 1.71		$ 1.71
03/13/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 02/18/92-03/15/92 27 DAYS AVERAGE YIELD 3.89 %.	1.25		1.25
Total earnings from money funds			$ 2.96	$ 0.00	$ 2.96

Notice of Fee Change.
Effective May 1, 1992, we will increase administrative charges on transaction confirmations from $2.85 to $3.85. Offerings made by prospectus and most short-term fixed-income instruments such as money markets, certificates of deposit and Treasury bills will not be subject to this charge. The fee is being increased so that we may continue to deliver high-quality products and services to you while ensuring that we remain competitively priced.

Notice of Custodial Fee.
Your retirement plan custodial fee is due by May 31, 1992. Please see the enclosed newsletter for important information regarding payment alternatives. Your fee invoice will arrive soon.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client IRA Statement

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 481.89
Accrued money fund dividends	.81
Mutual funds	8,885.61
Unit investment trusts	3,130.00
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,478.31**
Net value last period	**$ 12,481.96**

Earnings summary

	This period	This year
Dividends	$ 39.85	$ 176.02
Money funds earnings	1.16	4.70
Total	**$ 41.01**	**$ 180.72**

Additional summary information

	This period	This year
Other income	$ 54.80	$ 112.32

Bulletin board

What is Your Investment Goal? Is it to beat money market or CD returns? Consider extending fixed-income maturities and buying quality, high-yielding stocks with high dividend growth rates. Do you want to beat the S&P 500? Good values lie in stocks sensitive to changes in the economy. Speak with your Financial Consultant.

Dear Valued Client: Friends, associates and relatives may need the services of an experienced Financial Consultant. Should the occasion arise and you feel it is appropriate, your Financial Consultant would welcome your recommendation.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 425.93
Automatic reinvestments		-39.85	
Dividends credited	39.85		
Money funds earnings reinvested	1.16		
Other income credited	54.80		
Total	$ 95.81	$ -39.85	
Combined closing cash and money funds balance			$ 481.89

Money funds 481.89

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 04/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	481.89	$ 481.89	$ .81	3.727%	
Total value of money funds		$ 481.89	$ .81		

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Description	Number of shares	Price	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 14.39	$ 4,297.40	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	385.577	10.85	4,183.51	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	28.56	13.47	384.70	
Total value of mutual funds			**$ 8,865.61**	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 81 A SER-FR UNDIV INT	2 649	$ 1 164	.536%	$ 16 81	$ 3,130 00	
Total value of unit investment trusts				$ 16 81	$ 3,130 00	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
04/24/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.356	$ 10.52	$ -35.31
04/24/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.254	13.43	-3.54
Total automatic reinvestments				$ -39.85

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
04/24/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 04/16/92 PAY 04/24/92	$ 36.31		$ 36.31
04/24/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 04/16/92 PAY 04/24/92	3.54		3.54
	Interest earned		$ 39.85	$ 0.00	$ 39.85

	Comment	Taxable	Non-taxable	Amount
CASH® DAILY	REINVESTED FOR PERIOD 03/16/92-04/12/92 28 DAYS AVERAGE YIELD 3.79 %.	$ 1.16		$ 1.16
		$ 1.16	$ 0.00	$ 1.16

Comment	Amount
DISTRIBUTION 13251846681068	$ 23.92
DISTRIBUTION 13251846635591	30.88
	$ 54.80

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

***NICK JOE RAHALL II

Account number 685-60527-14 240

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 425.93
04/21/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	54.80	54.80
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1.18	1.18
	Closing money funds balance			$ 481.89

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client IRA Statement

July 31, 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 483.18
Accrued money fund dividends	1.02
Mutual funds	8,019.66
Unit investment trusts	3,100.42
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,604.28**
Net value last period	**$ 12,478.31**

Earnings summary

	This period	This year
Dividends	$ 40.20	$ 216.22
Money funds earnings	1.29	5.99
Total	$ 41.49	$ 222.21

Additional summary information

	This period	This year
Other income	$ 0.00	$ 112.32

Bulletin board

Was Your 1991 Tax Bill More Than You Expected?
What will it be in '92? Tax law changes may have increased your effective federal tax rate to over 31%. State and local income taxes are also rising. Your Financial Consultant is especially equipped to advise you on municipal bonds and other tax free investments.

New Statement Feature on Mutual Funds:
This month we are introducing Dividend Yields on your Shearson Lehman Brothers Income mutual fund holdings. Dividend Yield, which is based on net asset value (described in the Price column) will be reported for your shares at the end of each month.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Consolidated Monthly Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 481.69
Automatic reinvestments		-40.20	
Deposits	40.00		
Withdrawals		-40.00	
Dividends credited	40.20		
Money funds earnings reinvested	1.29		
Total	$ 81.49	$ -80.20	
Combined closing cash and money funds balance			$ 483.18

Money funds 483.18

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 05/29/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	483.18	$ 483.18	$ 1.02	3.559%	
Total value of money funds		$ 483.18	$ 1.02		

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Unaligned Client IRA Statement

May 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 14.28		$ 4,264.55	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	388.919	10.98	10.401	4,262.55	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	28.622	13.62	11.013	392.58	
Total value of mutual funds				$ 8,919.68	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT	2,[illegible]	$ 1.153	.542%	$ 16.81	$ 3,100.42	
Total value of unit investment trusts				$ 16.81	$ 3,100.42	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

***NICK JOE RAHALL II

Account number 685-80527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
05/29/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	3.342	$ 10.96	$ -36.63
05/29/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	.262	13.62	-3.57
Total automatic reinvestments				$ -40.20

Deposits

Date	Description	Amount
05/05/92	FROM 685-03367-02 TO 685-80527 01 CUSTODIAL FEE	$ 40.00

Withdrawals

Date	Description	Reference no.	Amount
05/08/92	CUSTODIAL FEE		$ 40.00

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
05/29/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 05/21/92 PAY 05/29/92	$ 36.63		$ 36.63
05/29/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 05/21/92 PAY 05/29/92	3.57		3.57
Total dividends earned			$ 40.20	$ 0.00	$ 40.20

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Monthly Client Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
05/08/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 04/13/92-05/10/92 28 DAYS AVERAGE YIELD 3.64 %.	$ 1.29		$ 1.29
Total earnings from money funds			$ 1.29	$ 0.00	$ 1.29

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 481.89
05/08/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	40.00	40.00
05/08/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	40.00	-40.00
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1.29	1.29
	Closing money funds balance			$ 483.18

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Service Statement

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
H JOE RAHALL

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Account value

Money funds	$ 3,232.98
Accrued money fund dividends	1.30
Mutual funds	8,839.58
Direct investments	(see Portfolio details)
Net value this period	**$ 12,073.86**
Net value last period	**$ 12,504.28**

Earnings summary

	This period	This year
Dividends	$ 40.55	$ 256.77
Money funds earnings	1.70	7.69
Total	**$ 42.25**	**$ 264.46**

Additional summary information

	This period	This year
Other income	$ 0.00	$ 112.32

Bulletin board

Avoid "Double Whammy."
The "double whammy" of lower yields and higher taxes means that you may need to look beyond traditional savings vehicles to earn income, manage tax liabilities and fight inflation. Ask your Financial Consultant for our Special Report, Avoiding The "Double Whammy" of Lower Interest Rates and Higher Taxes (GP2150).

Uncommon Values.
Our 44th edition of Uncommon Values in Common Stocks - a list of 10 stocks we believe will outperform the market over the next 12 months - was announced July 1. Ask your Financial Consultant for your copy of 10 Uncommon Values in Common Stocks (RS2012).

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

June 1, 1992 - June 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 483.18
Securities bought and other subtractions		0.00	
Automatic reinvestments		-40.55	
Securities sold and other additions	2,748.10		
Deposits	0.00		
Withdrawals		0.00	
Dividends credited	40.55		
Money funds earnings reinvested	1.70		
Total	$ 2,790.35	$ -40.55	
Combined closing cash and money funds balance			$ 3,232.98

Money funds	3,232.98

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 06/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	3,232.98	$ 3,232.98	$ 1.30	3.497%	
Total value of money funds		$ 3,232.98	$ 1.30		

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 13.82		$ 4,127.18	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	392.261	11.00	10.363	4,315.09	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	29.066	13.66	10.96	397.31	
Total value of mutual funds				$ 8,839.58	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping It reflects purchases through Shearson Lehman Brothers or information supplied to us Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Monthly Statement

June 26, 1992

***NICK JOE RAHALL II

Account number 885-60527-14 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
06/25/92	Sold	UTS UNCOMMON VALUES UT # 91 A SER-FR UNDIV INT FILLED FULL PRICE IS 1.02198000 AS OF 06/18/92	-2,689	$ 1.021	$ 2,748.10
Total securities bought and other subtractions					$ 0.00
Total securities sold and other additions					$ 2,748.10

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
06/26/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND FOR PERIOD 05/30/92-06/26/92 28 DAYS AVERAGE YIELD 10.37 %.	3.362	$ 10.99	$ -36.95
06/26/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 05/30/92-06/26/92 28 DAYS AVERAGE YIELD 10.98 %.	.264	13.65	-3.60
Total automatic reinvestments				$ -40.55

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
06/26/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 06/19/92 PAY 06/26/92	$ 36.95		$ 36.95
06/26/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 06/19/92 PAY 06/26/92	3.60		3.60
Total dividends earned			$ 40.55	$ 0.00	$ 40.55

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Please detach for statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
08/12/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 05/11/92-08/14/92 35 DAYS AVERAGE YIELD 3.52 %.	$ 1.70		$ 1.70
Total earnings from money funds			$ 1.70	$ 0.00	$ 1.70

Money funds details

All transactions are traded at $1.00 per share

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 483.18
08/26/92	Autoinvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	2,748.10	2,748.10
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1.70	1.70
	Closing money funds balance			$ 3,232.98

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client IRA Statement

July 1 - July 31, 1992

PAGE 1 OF 6

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 544.80
Accrued money fund dividends	.98
Mutual funds	9,055.66
Unit investment trusts	2,749.40
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,350.84**
Net value last period	**$ 12,073.86**

Bulletin board

Yield Shock? To learn why you need a new investment strategy in today's market and how different types of bonds can enhance your returns, ask your Financial Consultant for Five Ways To Beat Low Interest Rates (FX2011).

Did You Know You Can Receive A Free American Express Gold Card Through The Financial Management Account (FMA)? With the Gold Card linked to an FMA, charges are paid automatically through a monthly debit to your account. All charges are clearly detailed on your FMA statement.

Earnings summary

	This period	This year
Dividends	$ 40.91	$ 297.68
Money funds earnings	4.15	11.84
Total	$ 45.06	$ 309.52

Additional summary information

	This period	This year
Other income	$ 54.80	$ 167.12

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Balance Client IRA Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 3,232.96
Securities bought and other subtractions		-2,747.13	
Automatic reinvestments		-40.91	
Securities sold and other additions	0.00		
Deposits	0.00		
Withdrawals		0.00	
Dividends credited	40.91		
Money funds earnings reinvested	4.15		
Other income credited	54.80		
Total	$ 99.86	$ -2,786.04	
Combined closing cash and money funds balance			$ 544.80

Money funds	544.80

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Fee Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 07/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	544.80	$ 544.80	$ .98	3.299%	
Total value of money funds		$ 544.80	$ .98		

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 14.19		$ 4,237.67	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	395.624	11.15	10.224	4,411.21	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	29.349	13.86	10.822	406.78	
Total value of mutual funds				$ 9,055.66	

Unit investment trusts

Description	No of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT	2,733	$ 1.006			$ 2,749.40	
Total value of unit investment trusts				$ 0.00	$ 2,749.40	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/88
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Customer Client Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Date	Activity	Description	Quantity	Price	Amount
07/09/92	Bought	UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT FILLED FULL PRICE IS 1.00517000 NEXT DAY TRADE	2,733	$ 1.005	$ -2,747.13
Total securities bought and other subtractions					$ -2,747.13
Total securities sold and other additions					$ 0.00

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs

Date	Description	Quantity	Price	Amount
07/31/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND FOR PERIOD 06/27/92-07/31/92 35 DAYS AVERAGE YIELD 10.22 %.	3.343	$ 11.15	$ -37.27
07/31/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 06/27/92-07/31/92 35 DAYS AVERAGE YIELD 10.62 %.	.263	13.86	-3.64
Total automatic reinvestments				$ -40.91

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
07/31/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 07/24/92 PAY 07/31/92	$ 37.27		$ 37.27
07/31/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 07/24/92 PAY 07/31/92	3.64		3.64
Total dividends earned			$ 40.91	$ 0.00	$ 40.91

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Period Activity Statement

***NICK JOE RAHALL II

Account number 685-60527-14 240

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
07/10/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 06/15/92-07/12/92 28 DAYS AVERAGE YIELD 3.44 %.	$ 4.15		$ 4.15
Total earnings from money funds			$ 4.15	$ 0.00	$ 4.15

Other income

Date	Description	Comment	Amount
07/15/92	BALCOR EQUITY PEN INV III	DISTRIBUTION 13251846681068	$ 23.92
07/15/92	BALCOR EQUITY PENSION INV II	DISTRIBUTION 13251846635591	30.88
Total other income			$ 54.80

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 3,232.98
07/09/92	Redemption	AMERICAN EXPRESS® DAILY DIVIDEND FUND	2,747.13	-2,747.13
07/16/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	54.80	54.80
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	4.15	4.15
	Closing money funds balance			$ 544.80

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

August 1 - September 30, 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds		$ 547.82
Accrued money fund dividends		.82
Mutual funds		9,059.17
Unit investment trusts		2,675.61
Direct investments		*(see Portfolio details)*
Net value this period		$ 12,283.42
Net value last period	$ 12,350.84	

Earnings summary

	This period	This year
Dividends	$ 82.85	$ 380.53
Money funds earnings	3.02	14.86
Total	$ 85.87	$ 395.39

Additional summary information

	This period	This year
Other income	$ 0.00	$ 167.12

Bulletin board

Research Rankings Are Now On Your Statement.
As an added service, the research rankings of all common stocks followed by our analysts are featured in the Portfolio details section of your statement. Definitions of rankings appear on the back of the statement. For more information on our highly rated equity research, contact your Financial Consultant.

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

September 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 544.80
Automatic reinvestments		-82.85	
Deposits	0.00		
Withdrawals		0.00	
Dividends credited	82.85		
Money funds earnings reinvested	3.02		
Total	$ 85.87	$ -82.85	
Combined closing cash and money funds balance			$ 547.82

Cash	0.00
Money funds	547.82

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 09/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	547.82	$ 547.82	$ .82	3.082%	
Total value of money funds		$ 547.82	$ .82		

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

August 1 - September 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298.638	$ 13.69		$ 4,088.35	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	402.315	11.31	10.079	4,550.18	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	29.875	14.08	10.653	420.64	
Total value of mutual funds				$ 9,059.17	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT	2,733	$ .979			$ 2,675.61	
Total value of unit investment trusts				$ 0.00	$ 2,675.61	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC

Preferred Client Rate Statement
September 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
08/28/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND FOR PERIOD 08/01/92-08/28/92 28 DAYS AVERAGE YIELD 10.13 %	3.346	$ 11.23	$ -37.58
08/28/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 08/01/92-08/28/92 28 DAYS AVERAGE YIELD 10.74 %	.263	13.96	-3.67
09/25/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND FOR PERIOD 08/29/92-09/25/92 28 DAYS AVERAGE YIELD 10.06 %.	3.345	11.33	-37.90
09/25/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 08/29/92-09/25/92 28 DAYS AVERAGE YIELD 10.64 %.	.263	14.09	-3.70
Total automatic reinvestments				**$ -82.85**

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
08/28/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 08/21/92 PAY 08/28/92	$ 37.58		$ 37.58
08/28/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 08/21/92 PAY 08/28/92	3.67		3.67

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Personal Statement

September 30, 1992

***NICK JOE RAHALL II

Account number 885-60527-14 240

Dividends
continued

Date	Description	Comment	Taxable	Non-taxable	Amount
09/25/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 09/18/92 PAY 09/25/92	$ 37.90		$ 37.90
09/25/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 09/18/92 PAY 09/25/92	3.70		3.70
Total dividends earned			$ 82.85	$ 0.00	$ 82.85

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
08/14/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 07/13/92-08/16/92 35 DAYS AVERAGE YIELD 3.21 %.	$ 1.66		$ 1.66
09/11/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 08/17/92-09/13/92 28 DAYS AVERAGE YIELD 3.14 %.	1.36		1.36
Total earnings from money funds			$ 3.02	$ 0.00	$ 3.02

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Ref: 00000055 00000486

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

October 1 - October 31, 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 603.90
Accrued money fund dividends	.97
Mutual funds	9,014.21
Unit investment trusts	2,741.20
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,360.28**
Net value last period	**$ 12,283.42**

Earnings summary

	This period	This year
Dividends	$ 41.95	$ 422.48
Money funds earnings	1.28	16.14
Total	$ 43.23	$ 438.62

Additional summary information

	This period	This year
Other income	$ 54.60	$ 221.92

Bulletin board

#1 In Research Poll -- Again. *In October, Institutional Investor magazine announced that, for the third consecutive year, Shearson Lehman Brothers has more All-Star equity research analysts than any other firm. And, for the first time we are #1 in fixed-income research. Ask your Financial Consultant how you can take advantage of our All-Star research.*

Planning For Retirement?. *If you're a business owner looking for a year-end tax deduction or a way to capture higher rates of return for existing retirement plans, talk to your Financial Consultant now. Also, if you have more than one IRA, consider consolidating them with us.*

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

October 1 - October 31, 1992

Ref: 00000000 00000497

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 547 82
Automatic reinvestments		-41 95	
Deposits	0 00		
Withdrawals		0 00	
Dividends credited	41 95		
Money funds earnings reinvested	1 28		
Other income credited	54 80		
Total	$ 98 03	$ -41 95	
Combined closing cash and money funds balance			$ 603 90

Cash	0 00
Money funds	603 90

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0 00	$ 0 00	$ 0 00	$ 0 00

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 10/30/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	603 90	$ 603 90	$ 97	2 955%	
Total value of money funds		$ 603 90	$ 97		

SHEARSON LEHMAN BROTHERS

Ref. 00000000 00000000

SHEARSON LEHMAN BROTHERS

Preferred Client IRA Statement

October 1 - October 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS PORT SECTOR ANALYSIS	298 838	$ 13.90		$ 4,151.07	
SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	405 799	10.97	10 391	4,451.62	
SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	30 148	13.65	10 989	411.52	
Total value of mutual funds				$ 9,014.21	

Unit investment trusts

Description	No of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT	2,733	$ 1.003			$ 2,741.20	
Total value of unit investment trusts				$ 9.00	$ 2,741.20	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000 00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000 00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

October 1 - October 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
10/30/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND FOR PERIOD 09/26/92 10/30/92 35 DAYS AVERAGE YIELD 10 38 %	3.484	$ 10.97	$ -38 22
10/30/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 09/26/92 10/30/92 35 DAYS AVERAGE YIELD 10 98 %	273	13 65	-3 73
Total automatic reinvestments				$ -41 95

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
10/30/92	SHEARSON LEHMAN BROTHERS PORT HIGH INCOME BOND	CASH DIV RECORD 10/23/92 PAY 10/30/92	$ 38.22		$ 38.22
10/30/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 10/23/92 PAY 10/30/92	3 73		3.73
Total dividends earned			$ 41 95	$ 0 00	$ 41 95

Money funds earnings

Date	Description	Comment	Taxable	Non taxable	Amount
10/09/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 09/14/92-10/11/92 28 DAYS AVERAGE YIELD 3 01 %	$ 1 28		$ 1 28
Total earnings from money funds			$ 1 28	$ 0 00	$ 1 28

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

October 1 - October 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Other Income

Date	Description	Comment	Amount
10/16/92	BALCOR EQUITY PEN INV III	DISTRIBUTION 13251846681068	$ 23 92
10/16/92	BALCOR EQUITY PENSION INV II	DISTRIBUTION 13251846635591	30 88
Total other income			$ 54 80

Money funds details

All transactions are traded at $1 00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 647 82
10/19/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	54.80	54 80
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	1.28	1.28
	Closing money funds balance			$ 603 90

SHEARSON LEHMAN BROTHERS

Ref: 00003753 00000001

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

November 1 - November 30, 1992

Page 1 of 8

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
H JOE RAHALL

Account value

Money funds	$ 605.56
Accrued money fund dividends	.74
Mutual funds	9,297.11
Unit investment trusts	3,000.83
Direct investments	(see Portfolio details)
Net value this period	**$ 12,904.24**
Net value last period	**$ 12,360.28**

Earnings summary

	This period	This year
Dividends	$ 40.12	$ 462.60
Money funds earnings	1.66	17.80
Total	**$ 41.78**	**$ 480.40**

Additional summary information

	This period	This year
Other income	$ 0.00	$ 221.92

Bulletin board

Prepare For '93 New. *Help position your investments to take advantage of the New Year's most attractive opportunities. Our complimentary Strategic Asset Allocator (SAA) puts our research, again ranked #1 by Institutional Investor magazine, to work for you.*

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

Combined opening cash and money funds balance			$ 603 90
	Amounts added	Amounts subtracted	
Automatic reinvestments		-40.12	
Deposits	0 00		
Withdrawals		0 00	
Dividends credited	40 12		
Money funds earnings reinvested	1 66		
Total	$ 41 78	$ -40 12	
Combined closing cash and money funds balance			$ 605 56

Cash	0 00
Money funds	605.56

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0.00	$ 0.00	$ 0.00	$ 0.00

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 11/30/92.

Money funds

Description	No. of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	605 56	$ 605 56	$ .74	2 937%	
Total value of money funds		$ 605 56	-$ .74		

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SHEARSON LEHMAN BROTHERS

Ref: 000037

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

November 1 - November 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS SECTOR ANALYSIS FUND CL B	298.638	$ 14.51		$ 4,333.24	
SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B	409.278	11.10		4,542.99	
SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL A	37.917	11.10		420.88	
Total value of mutual funds				$ 9,297.11	

Unit investment trusts

Description	No. of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT	2,733	$ 1.098			$ 3,000.83	
Total value of unit investment trusts				$ 0.00	$ 3,000.83	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000.00	Purchase date 01/28/86
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000.00	

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
11/20/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B FOR PERIOD 10/31/92-11/20/92 21 DAYS AVERAGE YIELD 10 28 %	3 479	$ 11.08	$ -38 55
11/20/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND FOR PERIOD 10/31/92-11/20/92 21 DAYS AVERAGE YIELD 4 48 %	113	13.88	-1.57
Total automatic reinvestments				$ -40 12

Other security activity

Date	Activity	Description	Quantity
11/20/92	Merger	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL A 37.917 SHRS @ $11.08000000 MARKET VALUE $420.12 TAX FREE MERGER INTO	37.917
11/20/92	Merger	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND 30 261 SHRS @ $13 88308153 MARKET VALUE $420 12 TAX FREE MERGER FROM	-30.261

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement
November 1 - November 30, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
11/20/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B	CASH DIV RECORD 11/19/92 PAY 11/20/92	$ 38.55		$ 38.55
11/20/92	SHEARSON LEHMAN BROTHERS HIGH YIELD FUND	CASH DIV RECORD 11/19/92 PAY 11/20/92	1.57		1.57
Total dividends earned			$ 40.12	$ 0.00	$ 40.12

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
11/13/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 10/12/92-11/15/92 35 DAYS AVERAGE YIELD 2.93 %.	$ 1.66		$ 1.66
Total earnings from money funds			$ 1.66	$ 0.00	$ 1.66

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SHEARSON LEHMAN BROTHERS

Ref: 00000084/ 00000702

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement
December 1 - December 31, 1992

***NICK JOE RAHALL II
SHEARSON AS IRA CUSTODIAN
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
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STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-60527-14 240
SS # 236-78-8645

As you requested, copies of this statement have also been sent to:

TERRY SHEPHERD
N JOE RAHALL

Account value

Money funds	$ 612.39
Accrued money fund dividends	0.00
Mutual funds	9,404.37
Unit investment trusts	2,951.64
Direct investments	*(see Portfolio details)*
Net value this period	**$ 12,968.40**
Net value last period	**$ 12,904.24**

Earnings summary

	This period	This year
Dividends	$ 62.44	$ 525.04
Money funds earnings	2.29	20.09
Total	**$ 64.73**	**$ 545.13**

Additional summary information

	This period	This year
Other income	$ 0.00	$ 221.92

Bulletin board

Make The Most of '93. *This is the time of year when you and your Financial Consultant should review your needs and goals. Ask for our complimentary Strategic Asset Allocator, Retirement Planning and/or Education Funding Analysis.*

SHEARSON LEHMAN BROTHERS

Ref: 00000084 00000/0/01

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

December 1 - December 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Combined cash and money funds balance

	Amounts added	Amounts subtracted	
Combined opening cash and money funds balance			$ 605 56
Automatic reinvestments		-57.90	
Deposits	0.00		
Withdrawals		0 00	
Dividends credited	62 44		
Money funds earnings reinvested	2 29		
Total	$ 64 73	$ -57 90	
Combined closing cash and money funds balance			$ 612 39

Cash	0 00
Money funds	612 39

IRA activity summary

Amounts added to your IRA

The IRS requires Shearson Lehman Brothers to report only the total amount contributed to your IRA during the calendar year. It is your responsibility to determine which contributions, if any, are deductible when you calculate your income tax. The designations shown below are based on information you provided to your Financial Consultant.

Contributions

Description	Deductible portion	Non-deductible portion	Unspecified	Total
Contributions for the current tax year	$ 0 00	$ 0 00	$ 0 00	$ 0 00

Portfolio details

This section shows the holdings in your account It reflects values as of the close of business on 12/31/92.

Money funds

Description	No of shares	Market value	Accrued dividends	Average monthly yield	Comment
AMERICAN EXPRESS® DAILY DIVIDEND FUND	612 39	$ 612 39		2 99%	
Total value of money funds		$ 612 39	$ 0 00		

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement

December 1 - December 31, 1992

Ref: 0000000-0000000

***NICK JOE RAHALL II

Account number 685-60527-14 240

Mutual funds

Dividend yield is the estimated annual income, assuming the current dividend, divided by the fund's market price at the end of the statement period.

Description	Number of shares	Price	Dividend yield	Market value	Comment
SHEARSON LEHMAN BROTHERS SECTOR ANALYSIS FUND CL B	299.874	$ 14.63		$ 4,384.23	
SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B	412.787	11.13	10.29	4,594.32	
SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL A	38 259	11.13	10.83	425.82	
Total value of mutual funds				$ 9,404.37	

Unit investment trusts

Description	No of units	Price	Yield	Anticipated income (annualized)	Market value	Comment
UTS UNCOMMON VALUES UT # 92 A SER-FR UNDIV INT	2,733	$ 1 08			$ 2,951 64	
Total value of unit investment trusts				$ 0.00	$ 2,951 64	

Direct investments

We provide the following information about direct investments as an aid to your financial record keeping. It reflects purchases through Shearson Lehman Brothers or information supplied to us. Subsequent transactions, if any, are not reflected unless done through Shearson Lehman Brothers. We will continue to show each investment throughout the life of the direct investment unless you request otherwise. Face amounts do not necessarily reflect current market value.

Description	Face amount	Comment
BALCOR EQUITY PEN INV III	$ 2,000 00	Purchase date 01/28/88
BALCOR EQUITY PENSION INV II	4,000.00	Purchase date 01/10/85
Total direct investments	$ 6,000 00	

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client RA Statement

December 31, 1992

***NICK JOE RAHALL II

Account number 685-60527-14 240

Transaction details

Investment activity

Automatic reinvestments

This section shows all reinvestments made by Shearson Lehman Brothers on your behalf. It includes reinvestments of dividends and capital gains, as well as purchases made through systematic investment programs.

Date	Description	Quantity	Price	Amount
12/24/92	SHEARSON LEHMAN BROTHERS SECTOR ANALYSIS FUND CL B	1 038	$ 14.70	$ -15.23
12/24/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B FOR PERIOD 11/21/92 12/24/92 34 DAYS AVERAGE YIELD 10 28 %	3.509	11 08	-38 88
12/24/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL A FOR PERIOD 11/23/92-12/17/92 25 DAYS AVERAGE YIELD 10 83 %	.342	11 08	-3.79
Total automatic reinvestments				$ -57 90

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/24/92	SHEARSON LEHMAN BROTHERS SECTOR ANALYSIS FUND CL B	CASH DIV RECORD 12/17/92 PAY 12/24/92	$ 15 23		$ 15 23
12/24/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL B	CASH DIV RECORD 12/17/92 PAY 12/24/92	38 88		38 88
12/24/92	SHEARSON LEHMAN BROTHERS HIGH INCOME FUND CL A	CASH DIV RECORD 12/17/92 PAY 12/24/92	3 79		3 79

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client IRA Statement
December 1 - December 31, 1992

Ref: 00000084 00000/00

***NICK JOE RAHALL II

Account number 685-60527-14 240

Dividends *continued*

Date	Description	Comment	Taxable	Non-taxable	Amount
12/30/92	UNITS UNCOMMON VALUES UT 1985 SER-FR UNDIVIDED INT MONTHLY PMT	RETURN CAP ON 2403.0000 SHS RECORD 01/31/86 LEGAL RECOVERY	$ 1.97		$ 1.97
12/30/92	UNITS UNCOMMON VALUES UT 1985 SER-FR UNDIVIDED INT MONTHLY PMT	RETURN CAP ON 2403.0000 SHS RECORD 04/01/86 LEGAL RECOVERY	2.57		2.57
Total dividends earned			$ 62.44	$ 0.00	$ 62.44

Money funds earnings

Date	Description	Comment	Taxable	Non-taxable	Amount
12/11/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 11/16/92-12/13/92 28 DAYS AVERAGE YIELD 2.94 %.	$ 1.39		$ 1.39
12/31/92	AMERICAN EXPRESS® DAILY DIVIDEND FUND	REINVESTED FOR PERIOD 12/14/92-12/31/92 18 DAYS AVERAGE YIELD 2.99 %.	.90		.90
Total earnings from money funds			$ 2.29	$ 0.00	$ 2.29

Money funds details

All transactions are traded at $1.00 per share.

Money funds activity

Date	Activity	Description	Quantity	Amount
	Opening money funds balance			$ 605.58
12/31/92	AutoInvest	AMERICAN EXPRESS® DAILY DIVIDEND FUND	4.54	4.54
		MONEY FUNDS EARNINGS REINVESTED (SEE DETAILS UNDER EARNINGS DETAILS)	2.29	2.29
	Closing money funds balance			$ 612.39

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

November 1 - December 31, 1992

Ref:

NICK JOE RAHALL ACF
SUZANNE NICOLE RAHALL UGTMAIWV
THE CANNON BLDG
WASHINGTON DC 20515-0008

Your Financial Consultant

JAMES A JOSEPH
SHEARSON LEHMAN BROTHERS
701 MAIN STREET
SUITE 100
STROUDSBURG PA 18360
717-421-3100

Preferred Client Service Center: 800-232-4454

Account number 685-08740-14 240
SS # 233-25-9977

As you requested, copies of this statement have also been sent to:

N. JOE RAHALL
JAMES T SHEPHERD

Account value

Stocks	$ 18,950.00
Bonds	5,694.80
Income account balance	.08
Net value this period	**$ 24,644.88**
Net value last period	$ 23,080.02

Bulletin board

Make The Most of '93. This is the time of year when you and your Financial Consultant should review your needs and goals. Ask for our complimentary Strategic Asset Allocator, Retirement Planning and/or Education Funding Analysis.

Earnings summary

	This period	This year Taxable	Non-taxable
Interest	$ .18	$ .87	$ 0.00
Dividends	15.00	35.00	0.00
Total	$ 15.18	$ 35.87	$ 0.00

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SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Cash balance

	Amounts added	Amounts subtracted	
Opening cash balance			$ 40.92
Withdrawals		-56.02	
Interest credited	.18		
Dividends credited	15.00		
Total	$ 15.18	$ -56.02	
Closing cash balance			$ .08

Cash	0.00
Income account balance	.08

Portfolio details

This section shows the holdings in your account. It reflects values as of the close of business on 12/31/92.

Stocks

Common stocks	Exchange	No. of shares	Price	Yield	Anticipated income (annualized)	Market value	Research* Ranking	Comment
AMGEN INC	OTC	100	$ 70.625			$ 7,062.50	1/M	Symbol: AMGN\Rated: B-
MCI COMMUNICATIONS CORP	OTC	300	39.625	.252	30.00	11,887.50	2/H	Symbol: MCIC\Rated: B
Total value of stocks					$ 30.00	$ 18,950.00		

*Please refer to the back of the statement for definitions of research rankings.

Bonds

Some bond values provided by outside pricing services may be inaccurate. They are provided only as a guide to determining portfolio value. For more specific values, please call your Financial Consultant.

Municipal bonds	Amount	Interest rate	Maturity date	Price	Anticipated income (annualized)	Market value	Comment
DISTRICT COLUMBIA G/O SER A BK ENTRY-0-CPN-C/A-7.30%-AMBAC DTD 5/4/89	$ 10,000.00	0.00%	06/01/02	56.948		$ 5,694.80	Next call** on 06/01/99 Call price $ 83.08 Rated AAA/AAA
Total value of bonds	$ 10,000.00				$ 0.00	$ 5,694.80	

**This bond may be subject to other call provisions. Please contact your Financial Consultant for further information.

SHEARSON LEHMAN BROTHERS

SHEARSON LEHMAN BROTHERS INC.

Preferred Client Statement

November 1 - December 31, 1992

NICK JOE RAHALL ACF

Account number 685-08740-14 240

Transaction details

Withdrawals

Date	Description	Reference no	Amount
12/15/92	DIVIDEND CHECK PAID		$ 58.02

Earnings details

The tax status of earnings is reliable to the best of our knowledge. Taxable and non-taxable designations refer to the federal income tax status of your securities, not of your account.

Interest credited

Date	Description	Comment	Taxable	Non-taxable	Amount
11/23/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.544% 10/21 THRU 11/22	$ .10		$ .10
12/21/92	INTEREST ON CREDIT BALANCE	INT ON DIVIDEND CREDIT BALANCE AT 2.783% 11/23 THRU 12/20	.08		.08
Total interest earned			$ .18	$ 0.00	$ .18

Dividends

Date	Description	Comment	Taxable	Non-taxable	Amount
12/07/92	MCI COMMUNICATIONS CORP	CASH DIV ON 300.0000 SHS RECORD 11/13/92 PAY 12/07/92	$ 15.00		$ 15.00
Total dividends earned			$ 15.00	$ 0.00	$ 15.00

Important Administrative Notice. Effective February 15, 1993, we will assess a $50 charge for any account closed when assets are transferred to another financial institution. This fee will cover related costs incurred by this transfer.

Statement of Your Account

DEAN WITTER

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PAGE 1

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-70-8645	DEC 31 1992

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW
8409N
WASHINGTON DC 20024 3929

#8

YOUR ACCOUNT EXECUTIVE:

PEAR/HANDO
DEAN WITTER REYNOLDS INC.
1050 K STREET, N.W., SUITE 900
WASHINGTON, DC 20006
TEL 202-862-9000

INCOME & CHARGE SUMMARY

DESCRIPTION	THIS MONTH	YEAR-TO-DATE
DIVIDENDS	363.25CR	798.32CR
INTEREST INCOME	.00	.00
MARGIN INTEREST	.00	.00
ACCRUED BOND INTEREST	.00	.00

ACCOUNT VALUATION SUMMARY

TOTAL VALUE OF PRICED INVESTMENTS	90,118.75
TOTAL VALUE OF CUSTODIAL HOLDINGS	17,981.33
CLOSING CASH BALANCE	50.00CR
TOTAL ACCOUNT VALUATION	108,150.00

YOUR INVESTMENTS AS OF DECEMBER 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	40	AMERICAN TEL & TELEG CO	51	2,040.00	2.50	52.00
CASH	LONG	40	AMOCO CORP	48 3/4	1,950.00	4.51	88.00
CASH	LONG	60	ARMSTRONG WORLD INDUSTRIES INC	31 7/8	1,912.50	3.76	72.00
CASH	LONG	30	AUTOMATIC DATA PROCESSING INC	53 1/8	1,593.75	.86	13.80
CASH	LONG	40	BENEFICIAL CORP	66	2,640.00	4.24	112.00
CASH	LONG	40	BRISTOL MYERS SQUIBB CO	67 1/2	2,700.00	4.26	115.20
CASH	LONG	20	CSX CORP	68 3/4	1,375.00	2.21	30.40
CASH	LONG	70	FLEET FINANCIAL GROUP INC NEW	32 3/4	2,292.50	2.74	63.00
CASH	LONG	30	CHEVRON CORP	69 1/2	2,085.00	4.74	99.00
CASH	LONG	40	CIGNA CP	58 5/8	2,345.00	5.18	121.60
CASH	LONG	40	COOPER INDUSTRIES	47 3/8	1,895.00	2.61	49.60
CASH	LONG	30	DELUXE CORPORATION	46 3/4	1,402.50	2.99	42.00
CASH	LONG	40	WALT DISNEY CO DE	43	1,720.00	.40	8.40
CASH	LONG	60	DOMINION RESOURCES INC VA	39 1/2	2,370.00	6.22	147.60
CASH	LONG	40	EMERSON ELECTRIC CO	55	2,200.00	2.61	57.60
CASH	LONG	20	FEDERAL EXPRESS CORPORATION	54 1/2	1,090.00		
CASH	LONG	50	FLUOR CORP	41 7/8	2,093.75	1.14	24.00
CASH	LONG	50	GTE CORP	34 5/8	1,731.25	5.25	91.00
CASH	LONG	50	GENERAL MOTORS CORP	32 1/4	1,612.50	2.48	40.00
CASH	LONG	50	GENUINE PARTS CO	34	1,700.00	2.94	50.00
CASH	LONG	80	GLAXO HOLDINGS PLC SPONS ADR	23 5/4	1,900.00	2.62	49.84
CASH	LONG	50	H J HEINZ CO	44 1/8	2,206.25	2.71	60.00
CASH	LONG	30	HEWLETT PACKARD	69 7/8	2,096.25	1.14	24.00
CASH	LONG	60	INGERSOLL RAND	29 1/8	1,747.50	2.40	42.00
CASH	LONG	20	INTL BUSINESS MACHINES CORP	50 3/8	1,007.50	9.60	96.00
CASH	LONG	30	ITT CORP	72	2,160.00	2.55	55.20
CASH	LONG	60	LIMITED INC	27	1,620.00	1.03	16.80
CASH	LONG	20	MAY DEPARTMENT STORES	70 5/8	1,412.50	2.35	33.20
CASH	LONG	40	MC GRAW HILL INC	61 3/8	2,455.00	3.64	89.60
CASH	LONG	40	MONSANTO CO	57 5/8	2,305.00	3.88	89.60
CASH	LONG	40	J P MORGAN & CO	65 3/4	2,630.00	3.65	96.00
CASH	LONG	20	MOTOROLA INC	104 1/2	2,090.00	.84	17.60
CASH	LONG	50	NORWEST CP	43 1/8	2,156.25	2.60	50.00
CASH	LONG	40	PACIFIC TELESIS GP	44 3/8	1,775.00	4.91	87.20
CASH	LONG	50	PEPSICO INC NC	41 1/2	2,075.00	1.26	26.00
CASH	LONG	60	PITNEY BOWES INC	39 7/8	2,392.50	1.95	46.80
CASH	LONG	50	PROCTER & GAMBLE	53 5/8	2,681.25	2.05	55.00
CASH	LONG	40	REYNOLDS METALS CO	53 1/8	2,125.00	3.38	72.00
CASH	LONG	30	SCHERING PLOUGH CORP	63 5/8	1,908.75	2.45	46.80
CASH	LONG	40	SCHLUMBERGER LTD	57 1/4	2,290.00	2.09	48.00

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 100600	022	256-70-0645	DEC 31 1992

NICK JOE RAHALL II

YOUR INVESTMENTS AS OF DECEMBER 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	40	TEXACO INC	59 3/4	2,390.00	5.35	120.00
CASH	LONG	70	TIMKEN CO	26 1/2	1,855.00	3.77	70.00
CASH	LONG	50	UNION CAMP CORP	46 1/8	2,306.25	3.50	70.00
CASH	LONG	50	WASTE MANAGEMENT INC	40	2,000.00	1.30	26.00
CASH	LONG	40	WHIRLPOOL CORP	44 5/8	1,785.00	2.46	44.00
			TOTAL VALUE OF PRICED INVESTMENTS.....		90,118.75	3.03	2,734.44

THE CUSTODIAN(S) OF THE INVESTMENTS LISTED BELOW HAVE REPORTED THAT, AS OF THE DATE SHOWN, YOUR ACCOUNT, MAINTAINED WITH SUCH CUSTODIAN REFLECTED THE FOLLOWING:

CUST.	FUND	DATE	ACCOUNT NO.	SHARES/UNITS	N.A.V.	VALUE
DWTC	DEAN WITTER/SEARS LIQUID ASSET	12-31-92	026052130	17,981	1.00	17,981.33
	TOTAL VALUE OF CUSTODIAL HOLDINGS					17,981.33

DAILY ACTIVITY DURING DECEMBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
11/30	OPENING CASH BALANCE					11.70CR
12/01	CASH DIVIDEND		ARMSTRONG WORLD INDUSTRIES INC		10.00CR	
	CASH DIVIDEND		INGERSOLL RAND		12.25CR	
	BOUGHT	11.70	DEAN WITTER SEARS LIQUID ASSET	1.00	11.70DR	
	CASH DIVIDEND		NORWEST CP		14.50CR	
	CASH DIVIDEND		WORLWORTH CORP		14.00CR	50.75CR
12/02	BOUGHT	50.75	DEAN WITTER SEARS LIQUID ASSET	1.00	50.75DR	.00
12/07	CASH DIVIDEND		DELANE CORPORATION		10.50CR	10.50CR
12/08	BOUGHT	10.50	DEAN WITTER SEARS LIQUID ASSET	1.00	10.50DR	.00
12/10	CASH DIVIDEND		AMOCO CORP		16.50CR	
	CASH DIVIDEND		CHEVRON CORP		16.50CR	
	CASH DIVIDEND		EMERSON ELECTRIC CO		14.40CR	
	CASH DIVIDEND		GENERAL MOTORS CORP		0.00CR	
	CASH DIVIDEND		INTL BUSINESS MACHINES CORP		24.20CR	
	CASH DIVIDEND		MC GRAW HILL INC		16.00CR	
	CASH DIVIDEND		TEXACO INC		24.00CR	
	CASH DIVIDEND		TIMKEN CO		15.00CR	135.40CR
12/11	BOUGHT	135.40	DEAN WITTER SEARS LIQUID ASSET	1.00	135.40DR	

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108680	022	236-70-8645	DEC 31 1992

NICK JOE RAMALL II

DAILY ACTIVITY DURING DECEMBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
12/11	CASH DIVIDEND		MONSANTO CO		16.00CR	16.00CR
12/12	CASH DIVIDEND		PITNEY BOWES INC		9.75CR	26.55CR
12/14	BOUGHT	16.00	DEAN WITTER SEARS LIQUID ASSET	1.00	16.00DR	
	CASH DIVIDEND		UNION CAMP CORP		19.50CR	29.25CR
12/15	CASH DIVIDEND		CSX CORP		7.60CR	
	CASH DIVIDEND		LIMITED INC		5.60CR	
	CASH DIVIDEND		MAY DEPARTMENT STORES		12.45CR	54.90CR
12/16	SOLD	10	AMERICAN TEL & TELEG CO	48.50	484.90CR	
	BOUGHT	10	AMOCO CORP	49.125	491.25DR	
	BOUGHT	10	BENEFICIAL CORP	63.625	636.25DR	
	BOUGHT	10	CHEVRON CORP	69.25	692.50DR	
	SOLD	10	WALT DISNEY CO DE	48.75	487.40CR	
	SOLD	10	FEDERAL EXPRESS CORPORATION	54.375	545.75CR	
	BOUGHT	10	FLUOR CORP	42.75	427.50DR	
	BOUGHT	10	GENERAL MOTORS CORP	33.75	337.50DR	
	BOUGHT	10	GLAXO HOLDINGS PLC SPONS ADR	25.625	256.25DR	
	SOLD	10	INGERSOLL RAND	30.00	299.99CR	
	SOLD	1382.20	DEAN WITTER SEARS LIQUID ASSET	1.00	1,382.20CR	
	BOUGHT	25.65	DEAN WITTER SEARS LIQUID ASSET	1.00	25.65DR	
	SOLD	20	LIMITED INC	26.75	534.90CR	
	SOLD	10	MAY DEPARTMENT STORES	60.50	604.97CR	
	BOUGHT	10	MC GRAW HILL INC	61.625	616.25DR	
	BOUGHT	10	MONSANTO CO	55.00	550.00DR	
	BOUGHT	10	J P MORGAN & CO	62.50	625.00DR	
	BOUGHT	10	PITNEY BOWES INC	39.00	390.00DR	
	SOLD	10	PROCTER & GAMBLE	53.125	531.23CR	
	BOUGHT	10	SCHLUMBERGER LTD	57.25	572.50DR	
	BOUGHT	10	TEXACO INC	59.75	597.50DR	
	BOUGHT	10	TIMKEN CO	26.375	263.75DR	
	SOLD	50	WOOLWORTH CORP	32.75	1,637.44CR	.00
12/20	CASH DIVIDEND		DOMINION RESOURCES INC VA		36.90CR	36.90CR
12/22	BOUGHT	36.90	DEAN WITTER SEARS LIQUID ASSET	1.00	36.90DR	.00
12/31	CASH DIVIDEND		BENEFICIAL CORP		21.00CR	
	CASH DIVIDEND		REYNOLDS METALS CO		18.00CR	
	CASH DIVIDEND		WHIRLPOOL CORP		11.00CR	50.00CR
12/31	CLOSING CASH BALANCE					50.00CR

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108608	022	236-78-8645	DEC 31 1992

NICK JOE RAMALL II

SUPPLEMENTAL TAX INFORMATION

	TOTAL THIS MONTH	TOTAL YEAR-TO-DATE		TOTAL THIS MONTH	TOTAL YEAR-TO-DATE
REPORTABLE GROSS PROCEEDS	0,124.00	111,190.24	FOREIGN TAX PAID	0.00	4.71

THE SUPPLEMENTAL TAX INFORMATION PROVIDED ABOVE SHOULD BE USED ONLY AS A GUIDE, A COMPLETE 1099 WILL BE SENT TO YOU.

IMPORTANT MESSAGES

A RECORD 09 BILLION PLUS IN MUNICIPAL BONDS WILL BE REDEEMED IN JANUARY 1993. ARE YOU ONE OF THE MANY INVESTORS WITH PROCEEDS COMING DUE? SPEAK TO YOUR DEAN WITTER ACCOUNT EXECUTIVE, WHO CAN CONDUCT A PORTFOLIO REVIEW AND SUGGEST TIMELY MUNICIPAL BOND REINVESTMENT ALTERNATIVES.

IF YOU WISH TO BORROW, DEAN WITTER'S MARGIN LOAN RATE AS OF 12/31 IS 6.26% TO 8.00%

Statement of Your Account

PEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	NOV 30 1992

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW
8409N
WASHINGTON DC 20024 3929

YOUR ACCOUNT EXECUTIVE:

PEAR/HANDO
DEAN WITTER REYNOLDS INC.
1850 K STREET, N.W., SUITE 900
WASHINGTON, DC 20006
TEL 202-862-9000

INCOME & CHARGE SUMMARY

DESCRIPTION	THIS MONTH	YEAR-TO-DATE
DIVIDENDS	128.17CR	427.07CR
INTEREST INCOME	.00	.00
MARGIN INTEREST	.00	.00
ACCRUED BOND INTEREST	.00	.00

ACCOUNT VALUATION SUMMARY

TOTAL VALUE OF PRICED INVESTMENTS	88,721.25
TOTAL VALUE OF CUSTODIAL HOLDINGS	18,943.90
CLOSING CASH BALANCE	11.70CR
TOTAL ACCOUNT VALUATION	107,676.93

YOUR INVESTMENTS AS OF NOVEMBER 30 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	58	AMERICAN TEL & TELEG CO	47 1/8	2,354.25	2.80	66.00
CASH	LONG	38	AMOCO CORP	40 3/4	1,462.50	4.51	66.00
CASH	LONG	60	ARMSTRONG WORLD INDUSTRIES INC	29 1/4	1,755.00	4.10	72.00
CASH	LONG	30	AUTOMATIC DATA PROCESSING INC	52 1/4	1,567.50	.80	13.80
CASH	LONG	30	BENEFICIAL CORP	62	1,860.00	4.51	84.00
CASH	LONG	40	BRISTOL MYERS SQUIBB CO	67 1/8	2,685.00	4.11	110.40
CASH	LONG	20	CSX CORP	68 3/4	1,375.00	2.21	30.40
CASH	LONG	70	FLEET FINANCIAL GROUP INC NEW	32 7/8	2,301.25	2.73	63.00
CASH	LONG	20	CHEVRON CORP	68 3/4	1,375.00	4.80	66.00
CASH	LONG	40	CIGNA CP	56 3/4	2,270.00	5.35	121.60
CASH	LONG	40	COOPER INDUSTRIES	51 3/4	2,070.00	2.39	49.60
CASH	LONG	30	DELUXE CORPORATION	46 3/8	1,391.25	3.01	42.00
CASH	LONG	50	WALT DISNEY CO DE	42 1/8	2,106.25	.49	10.50
CASH	LONG	60	DOMINION RESOURCES INC VA	38 1/2	2,310.00	6.38	147.60
CASH	LONG	40	EMERSON ELECTRIC CO	53 5/8	2,145.00	2.68	57.60
CASH	LONG	30	FEDERAL EXPRESS CORPORATION	48 7/8	1,466.25		
CASH	LONG	40	FLUOR CORP	44 1/2	1,860.00	.86	16.00
CASH	LONG	50	GTE CORP	34 3/8	1,718.75	5.29	91.00
CASH	LONG	40	GENERAL MOTORS CORP	32 1/4	1,290.00	2.48	32.00
CASH	LONG	50	GENUINE PARTS CO	33 1/8	1,656.25	3.01	50.00
CASH	LONG	70	GLAXO HOLDINGS PLC SPONS ADR	24 1/4	1,697.50	2.56	45.61
CASH	LONG	50	H J HEINZ CO	42 5/8	2,131.25	2.81	60.00
CASH	LONG	30	HEWLETT PACKARD	66 1/2	1,995.00	1.20	24.00
CASH	LONG	70	INGERSOLL RAND	31 3/4	2,222.50	2.20	49.00
CASH	LONG	20	INTL BUSINESS MACHINES CORP	68 1/4	1,365.00	7.09	96.80
CASH	LONG	30	ITT CORP	71	2,130.00	2.59	55.20
CASH	LONG	80	LIMITED INC	27	2,160.00	1.03	22.40
CASH	LONG	30	MAY DEPARTMENT STORES	72 3/8	2,171.25	2.29	49.80
CASH	LONG	30	MC GRAW HILL INC	60 5/8	1,818.75	3.69	67.20
CASH	LONG	30	MONSANTO CO	56	1,680.00	4.00	67.20
CASH	LONG	30	J P MORGAN & CO	62 1/8	1,863.75	3.50	65.40
CASH	LONG	20	MOTOROLA INC	102 7/8	2,057.50	.85	17.60
CASH	LONG	50	NORWEST CP	42 3/8	2,118.75	2.73	58.00
CASH	LONG	40	PACIFIC TELESIS GP	42 3/4	1,710.00	5.09	87.20
CASH	LONG	50	PEPSICO INC NC	40 3/4	2,037.50	1.27	26.00
CASH	LONG	50	PITNEY BOWES INC	39	1,950.00	2.00	39.00
CASH	LONG	60	PROCTER & GAMBLE	54 1/4	3,255.00	2.02	66.00
CASH	LONG	40	REYNOLDS METALS CO	54 1/4	2,170.00	3.31	72.00
CASH	LONG	30	SCHERING PLOUGH CORP	66 1/2	1,995.00	2.34	46.00
CASH	LONG	30	SCHLUMBERGER LTD	61	1,830.00	1.96	36.00

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	NOV 30 1992

NICK JOE RAMALL II

YOUR INVESTMENTS AS OF NOVEMBER 30 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ X YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	50	TEXACO INC	60 1/8	1,003.75	5.52	96 00
CASH	LONG	60	TIMKEN CO	27 5/8	1,657.50	3.61	60.00
CASH	LONG	50	UNION CAMP CORP	47 5/8	2,381.25	3.27	78.00
CASH	LONG	50	WASTE MANAGEMENT INC	40 1/8	2,006.25	1.29	26.00
CASH	LONG	40	WHIRLPOOL CORP	44 1/2	1,780.00	2.47	44.00
CASH	LONG	50	WOOLWORTH CORP	34 1/4	1,712.50	3.27	56.00
			TOTAL VALUE OF PRICED INVESTMENTS.....		88,721.25	2.92	2,598.71

THE CUSTODIAN(S) OF THE INVESTMENTS LISTED BELOW HAVE REPORTED THAT, AS OF THE DATE SHOWN, YOUR ACCOUNT, MAINTAINED WITH SUCH CUSTODIAN REFLECTED THE FOLLOWING:

CUST.	FUND	DATE	ACCOUNT NO.	SHARES/UNITS	N.A.V.	VALUE
DWTC	DEAN WITTER/SEARS LIQUID ASSET	11-30-92	026052130	18,943	1.00	18,943.98
	TOTAL VALUE OF CUSTODIAL HOLDINGS					18,943.98

DAILY ACTIVITY DURING NOVEMBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
10/31	OPENING CASH BALANCE					.00
11/01	CASH DIVIDEND		BRISTOL MYERS SQUIBB CO		27.60CR	27.60CR
11/02	CASH DIVIDEND		AMERICAN TEL & TELEG CO		16.50CR	
	CASH DIVIDEND		PACIFIC TELESIS GP		21.00CR	65.90CR
11/03	BOUGHT	65.90	DEAN WITTER SEARS LIQUID ASSET	1.00	65.90DR	.00
11/16	CASH DIVIDEND		PROCTER & GAMBLE		16.50CR	16.50CR
11/17	BOUGHT	16.50	DEAN WITTER SEARS LIQUID ASSET	1.00	16.50DR	.00
11/20	CASH DIVIDEND		WALT DISNEY CO DE		2.62CR	2.62CR
11/23	CASH DIVIDEND		GLAXO HOLDINGS PLC SPONS ADR		26.74CR	
	CASH DIVIDEND		GLAXO HOLDINGS PLC SPONS ADR			
			ADJ GROSS DIV AMOUNT 4.71			
			FOREIGN TAX PAID IS 4.71			
	BOUGHT	2.62	DEAN WITTER SEARS LIQUID ASSET	1.00	2.62DR	26.74CR
11/24	BOUGHT	26.74	DEAN WITTER SEARS LIQUID ASSET	1.00	26.74DR	.00
[illegible]	CASH DIVIDEND		SCHERING PLOUGH CORP		11.70CR	11.70CR

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	NOV 30 1992

NICK JOE RAHALL II

DAILY ACTIVITY DURING NOVEMBER 1992

DATE	ACTIVITY	DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
11/30 CLOSING CASH BALANCE					11.70CR

SUPPLEMENTAL TAX INFORMATION

	TOTAL THIS MONTH	TOTAL YEAR-TO DATE		TOTAL THIS MONTH	TOTAL YEAR-TO-DATE
REPORTABLE GROSS PROCEEDS	0 00.	106,066 44	FOREIGN TAX PAID	4.71	4.71

THE SUPPLEMENTAL TAX INFORMATION PROVIDED ABOVE SHOULD BE USED ONLY AS A GUIDE. A COMPLETE 1099 WILL BE SENT TO YOU.

IMPORTANT MESSAGES

WHICH STOCKS ARE LIKELY TO PERFORM WELL UNDER THE CLINTON ADMINISTRATION? ASK YOUR ACCOUNT EXECUTIVE FOR YOUR FREE COPY OF OUR SPECIAL EDITION RESEARCH REPORT TITLED "THE NEW ADMINISTRATION" (#1957), NOW AVAILABLE FROM EQUITY RESEARCH. THIS TIMELY AND INFORMATIVE REPORT DISCUSSES OUR ECONOMIC OUTLOOK AND RECOMMENDED PORTFOLIO STRATEGY UNDER THE NEW ADMINISTRATION.

IF YOU WISH TO BORROW, DEAN WITTER'S MARGIN LOAN RATE AS OF 11/30 IS 6.25% TO 8.00%

Statement of Your Account

PAGE 1

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-0645	OCT 31 1992

NICK JOE MAHALL II
1301 DELAWARE AVENUE SW
B409M
WASHINGTON DC 20024 3929

YOUR ACCOUNT EXECUTIVE:

PEAR/HANOO
DEAN WITTER REYNOLDS INC.
1650 K STREET, N.W., SUITE 900
WASHINGTON, DC 20006
TEL 202 862 9000

INCOME & CHARGE SUMMARY

DESCRIPTION	THIS MONTH	YEAR-TO-DATE
DIVIDENDS	151 40CR	298 90CR
INTEREST INCOME	00	00
MARGIN INTEREST	00	00
ACCRUED BOND INTEREST	00	00

ACCOUNT VALUATION SUMMARY

TOTAL VALUE OF PRICED INVESTMENTS	84,748.00
TOTAL VALUE OF CUSTODIAL HOLDINGS	18,700.00
CLOSING CASH BALANCE	.00
TOTAL ACCOUNT VALUATION	103,548.08

YOUR INVESTMENTS AS OF OCTOBER 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	50	AMERICAN TEL & TELEG CO	43 5/8	2,181.25	3.02	66.00
CASH	LONG	30	AMOCO CORP	52 7/8	1,586.25	4.16	66.00
CASH	LONG	60	ARMSTRONG WORLD INDUSTRIES INC	28 1/8	1,687.50	4.26	72.00
CASH	LONG	30	AUTOMATIC DATA PROCESSING INC	48 3/8	1,451.25	.95	13.00
CASH	LONG	30	BENEFICIAL CORP	58	1,740.00	4.82	84.00
CASH	LONG	40	BRISTOL MYERS SQUIBB CO	68 1/8	2,725.00	4.05	110.40
CASH	LONG	20	CSX CORP	65 1/2	1,310.00	2.32	30.40
CASH	LONG	70	FLEET FINANCIAL GROUP INC NEW	29	2,030.00	2.75	56.00
CASH	LONG	20	CHEVRON CORP	71	1,420.00	4.64	66.00
CASH	LONG	40	CIGNA CP	51 3/8	2,055.00	5.91	121.60
CASH	LONG	40	COOPER INDUSTRIES	45 7/8	1,835.00	2.70	49.60
CASH	LONG	30	DELUXE CORPORATION	42	1,260.00	3.33	42.00
CASH	LONG	50	WALT DISNEY CO DE	39 3/8	1,968.75	.53	10.50
CASH	LONG	60	DOMINION RESOURCES INC VA	39 3/8	2,362.50	6.24	147.60
CASH	LONG	40	EMERSON ELECTRIC CO	52 1/8	2,085.00	2.64	55.20
CASH	LONG	30	FEDERAL EXPRESS CORPORATION	45 1/8	1,353.75		
CASH	LONG	40	FLUOR CORP	44 5/8	1,785.00	.89	16.00
CASH	LONG	50	GTE CORP	34 1/8	1,706.25	5.33	91.00
CASH	LONG	40	GENERAL MOTORS CORP	30 3/4	1,230.00	5.20	64.00
CASH	LONG	50	GENUINE PARTS CO	30 7/8	1,543.75	3.23	50.00
CASH	LONG	70	GLAXO HOLDINGS PLC SPONS ADR	25 1/8	1,758.75	2.92	51.38
CASH	LONG	50	H J HEINZ CO	39 3/8	1,968.75	3.04	60.00
CASH	LONG	30	HEWLETT PACKARD	56 7/8	1,706.25	1.40	24.00
CASH	LONG	70	INGERSOLL RAND	30 3/8	2,126.25	2.30	49.00
CASH	LONG	20	INTL BUSINESS MACHINES CORP	66 7/8	1,337.50	7.23	96.00
CASH	LONG	30	ITT CORP	65 1/8	1,953.75	2.82	55.20
CASH	LONG	80	LIMITED INC	25	2,000.00	1.12	22.40
CASH	LONG	30	MAY DEPARTMENT STORES	70 3/4	2,122.50	2.34	49.80
CASH	LONG	30	MC GRAW HILL INC	59 3/4	1,792.50	3.74	67.20
CASH	LONG	30	MONSANTO CO	55 5/8	1,668.75	4.02	67.20
CASH	LONG	30	J P MORGAN & CO	63	1,890.00	3.46	65.40
CASH	LONG	20	MOTOROLA INC	96	1,920.00	.79	15.20
CASH	LONG	50	NORWEST CP	42	2,100.00	2.76	58.00
CASH	LONG	40	PACIFIC TELESIS GP	41	1,640.00	5.31	87.20
CASH	LONG	50	PEPSICO INC NC	39 7/8	1,993.75	1.30	26.00
CASH	LONG	50	PITNEY BOWES INC	37 5/8	1,881.25	2.07	39.00
CASH	LONG	60	PROCTER & GAMBLE	52 7/8	3,172.50	2.08	66.00
CASH	LONG	40	REYNOLDS METALS CO	49 1/4	1,970.00	3.65	72.00
CASH	LONG	30	SCHERING PLOUGH CORP	62 3/8	1,871.25	2.50	46.80
CASH	LONG	30	SCHLUMBERGER LTD	63 1/2	1,905.00	1.88	36.00

Please see reverse side for legend

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	OCT 31 1992

NICK JOE RAHALL II

YOUR INVESTMENTS AS OF OCTOBER 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ X YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	30	TEXACO INC	60	1,800.00	5.33	96.00
CASH	LONG	60	TIMKEN CO	25 1/4	1,515.00	3.96	60.00
CASH	LONG	50	UNION CAMP CORP	45 5/8	2,281.25	3.41	78.00
CASH	LONG	50	WASTE MANAGEMENT INC	37 1/4	1,862.50	1.39	26.00
CASH	LONG	40	WHIRLPOOL CORP	39 3/8	1,575.00	2.79	44.00
CASH	LONG	50	WOOLWORTH CORP	32 5/8	1,631.25	3.43	56.00
			TOTAL VALUE OF PRICED INVESTMENTS.....		84,760.00	3.09	2,626.68

THE CUSTODIAN(S) OF THE INVESTMENTS LISTED BELOW HAVE REPORTED THAT, AS OF THE DATE SHOWN, YOUR ACCOUNT, MAINTAINED WITH SUCH CUSTODIAN REFLECTED THE FOLLOWING:

CUST.	FUND	DATE	ACCOUNT NO.	SHARES/UNITS	N.A.V.	VALUE
DWTC	DEAN WITTER/SEARS LIQUID ASSET	10-30-92	026052130	18,788	1.00	18,788.08
	TOTAL VALUE OF CUSTODIAL HOLDINGS					18,788.08

DAILY ACTIVITY DURING OCTOBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
9/30	OPENING CASH BALANCE					27.50CR
10/01	CASH DIVIDEND		FLEET FINANCIAL GROUP INC NEW		14.80CR	
	CASH DIVIDEND		AUTOMATIC DATA PROCESSING INC		3.45CR	
	CASH DIVIDEND		COOPER INDUSTRIES		12.40CR	
	CASH DIVIDEND		GENUINE PARTS CO		12.50CR	
	BOUGHT	27.50	DEAN WITTER SEARS LIQUID ASSET	1.00	27.50DR	
	CASH DIVIDEND		REYNOLDS METALS CO		18.00CR	
	CASH DIVIDEND		WASTE MANAGEMENT INC		6.50CR	66.85CR
10/02	BOUGHT	66.85	DEAN WITTER SEARS LIQUID ASSET	1.00	66.85DR	
	CASH DIVIDEND		SCHLUMBERGER LTD		9.00CR	9.00CR
10/05	BOUGHT	9.00	DEAN WITTER SEARS LIQUID ASSET	1.00	9.00DR	.00
10/07	SOLD	50	BANK OF NEW YORK	43 1/2	2,174.92CR	2,174.92CR
10/08	BOUGHT	50	WALT DISNEY CO DE	35.711	1,785.55DR	
	BOUGHT	389.37	DEAN WITTER SEARS LIQUID ASSET	1.00	389.37DR	.00
10/10	CASH DIVIDEND		CIGNA CP		30.40CR	
	CASH DIVIDEND		H J HEINZ CO		15.00CR	45.40CR
10/13	BOUGHT	45.40	DEAN WITTER SEARS LIQUID ASSET	1.00	45.40DR	.00

Please see reverse side for legend

Statement of Your Account

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	OCT 31 1992

NICK JOE WAHALL II

DAILY ACTIVITY DURING OCTOBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
10/14	CASH DIVIDEND		HEWLETT PACKARD		6.00CR	6.00CR
10/15	BOUGHT	6.00	DEAN WITTER SEARS LIQUID ASSET	1.00	6.00DR	
	CASH DIVIDEND		J P MORGAN & CO		16.35CR	
	CASH DIVIDEND		MOTOROLA INC		3.80CR	20.15CR
10/19	BOUGHT	20	CHEVRON CORP	73.357	1,467.14DR	
	SOLD	1446.99	DEAN WITTER SEARS LIQUID ASSET	1.00	1,446.99CR	.00
10/20	JOURNAL OUT		ACCESS 4092 FEE DEB		703.62DR	
	CASH DIVIDEND		FLUOR CORP		4.00CR	699.62DR
10/22	SOLD	699.62	DEAN WITTER SEARS LIQUID ASSET	1.00	699.62CR	.00
10/31	CLOSING CASH BALANCE					.00

SUPPLEMENTAL TAX INFORMATION

	TOTAL THIS MONTH	TOTAL YEAR-TO-DATE
REPORTABLE GROSS PROCEEDS	2,174.92	106,065.44

THE SUPPLEMENTAL TAX INFORMATION PROVIDED ABOVE SHOULD BE USED ONLY AS A GUIDE, A COMPLETE 1099 WILL BE SENT TO YOU.

IMPORTANT MESSAGES

THE INDIVIDUAL RETIREMENT ACCOUNT (IRA) CAN BE KEY TO RETIREMENT SECURITY. CALL YOUR ACCOUNT EXECUTIVE TODAY TO FIND OUT ABOUT THE BENEFITS OF OPENING, CONTRIBUTING TO, OR CONSOLIDATING YOUR IRAS AT DEAN WITTER. HE OR SHE CAN ALSO ANSWER YOUR QUESTIONS ABOUT THE NEW ROLLOVER RULES THAT WILL TAKE EFFECT IN 1993.

IF YOU WISH TO BORROW, DEAN WITTER'S MARGIN LOAN RATE AS OF 10/31 IS 6.25% TO 8.00%

Please see reverse side for legend

Dean Witter Family of Funds

July 1, 1992-September 30, 1992

Your account executive
PEAR/HANDO
DEAN WITTER REYNOLDS INC.
1850 K STREET, N.W., SUITE 900
WASHINGTON, DC 20006
(202) 862-9000

For mutual fund account information, call 1-800-526-3143
For all other mutual fund questions, call 1-800 869 FUND

Dean Witter account 642-106600-032

Total Market Value 09/30/92.....$ 20,345.18

Total Earnings this Quarter

Dividends	$ 11 34	Capital Gains	none

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW
409N
WASHINGTON DC 20024-3929

Year-to-date Summary

Fund name	*Purchases*	*Redemptions*	*Dividends*	*Capital gains*	*Taxes withheld*
Liquid Asset Fund	$ 20,345.18	none	$ 11.34	none	none

Fund Activity

Plan number 160 026052130 Tax ID number 236-78-8645 *Features you have chosen for this fund* reinvest dividends

Transaction date	*Activity*	*Gross dollar amount*	*Sales charge and or tax withheld*	*Net dollar amount*	*Number of shares added or deducted*	*Interim dividend*	*Total shares owned*
07/01/92	Opening balance						000
09/23/92	Purchase	$ 20,328 00	none	$ 20,328 00	20,328.000+	none	20,328 000
09/25/92	Purchase	5 84	none	5.84	5.840+	3.24+	20,337.080
09/30/92	Income dividend	8 10	none	8.10	8.100+	none	20,345.180
09/30/92	Closing balance						**20,345.180** total shares

Following are the Fund's 30 day average annualized yields during the past quarter July 3 31%, August 3 05% and September 2 95%

Statement of Your Account

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 100600	022	236-70-0645	SEP 30 1992

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW
8409W
WASHINGTON DC 20024 3929

YOUR ACCOUNT EXECUTIVE:

PEAR/HANDO
DEAN WITTER REYNOLDS INC.
1050 K STREET, N.W., SUITE 900
WASHINGTON, DC 20006
TEL 202 862 9000

INCOME & CHARGE SUMMARY

DESCRIPTION	THIS MONTH	YEAR-TO-DATE
DIVIDENDS	147.50CR	147.50CR
INTEREST INCOME	.00	.00
MARGIN INTEREST	.00	.00
ACCRUED BOND INTEREST	.00	.00

ACCOUNT VALUATION SUMMARY

TOTAL VALUE OF PRICED INVESTMENTS	82,503.75
TOTAL VALUE OF CUSTODIAL HOLDINGS	20,345.10
CLOSING CASH BALANCE	27.50CR
TOTAL ACCOUNT VALUATION	102,956.43

YOUR INVESTMENTS AS OF SEPTEMBER 30 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	50	AMERICAN TEL & TELEG CO	43 5/8	2,181.25	3.02	66.00
CASH	LONG	30	AMOCO CORP	52 3/4	1,582.50	4.17	66.00
CASH	LONG	60	ARMSTRONG WORLD INDUSTRIES INC	29 5/8	1,777.50	4.05	72.00
CASH	LONG	30	AUTOMATIC DATA PROCESSING INC	47 3/8	1,421.25	.97	13.00
CASH	LONG	50	BANK OF NEW YORK	44	2,200.00	3.45	76.00
CASH	LONG	30	BENEFICIAL CORP	61 3/4	1,852.50	4.53	84.00
CASH	LONG	40	BRISTOL MYERS SQUIBB CO	63 3/4	2,550.00	4.32	110.40
CASH	LONG	20	CSX CORP	59	1,180.00	2.57	30.40
CASH	LONG	70	FLEET FINANCIAL GROUP INC NEW	28 3/4	2,012.50	2.70	54.00
CASH	LONG	40	CIGNA CP	50	2,000.00	6.00	121.60
CASH	LONG	40	COOPER INDUSTRIES	51 1/4	2,050.00	2.41	49.60
CASH	LONG	30	DELUXE CORPORATION	41 3/4	1,252.50	3.35	42.00
CASH	LONG	40	DOMINION RESOURCES INC VA	38	2,540.00	6.10	142.00
CASH	LONG	40	EMERSON ELECTRIC CO	54 1/2	2,180.00	2.53	55.20
CASH	LONG	30	FEDERAL EXPRESS CORPORATION	36 1/8	1,083.75		
CASH	LONG	40	FLUOR CORP	43 5/8	1,745.00	.91	16.00
CASH	LONG	50	GTE CORP	34 1/8	1,706.25	5.33	91.00
CASH	LONG	40	GENERAL MOTORS CORP	32 1/8	1,285.00	4.98	64.00
CASH	LONG	50	GENUINE PARTS CO	30	1,500.00	3.33	50.00
CASH	LONG	70	GLAXO HOLDINGS PLC SPDRS ADR	27 1/4	1,907.50	2.69	51.38
CASH	LONG	50	H J HEINZ CO	38 5/8	1,931.25	3.18	60.00
CASH	LONG	30	HEWLETT PACKARD	55 3/4	1,672.50	1.43	24.00
CASH	LONG	70	INGERSOLL RAND	29 1/8	2,038.75	2.40	49.00
CASH	LONG	20	INTL BUSINESS MACHINES CORP	80 3/4	1,615.00	5.99	96.80
CASH	LONG	30	ITT CORP	67 5/8	2,028.75	2.72	55.20
CASH	LONG	80	LIMITED INC	21 7/8	1,750.00	1.28	22.40
CASH	LONG	30	MAY DEPARTMENT STORES	62 1/4	1,867.50	2.66	49.80
CASH	LONG	30	MC GRAW HILL INC	58 5/8	1,758.75	3.82	67.20
CASH	LONG	30	MONSANTO CO	54 7/8	1,646.25	4.08	67.20
CASH	LONG	30	J P MORGAN & CO	62 1/4	1,867.50	3.50	65.40
CASH	LONG	20	MOTOROLA INC	87 3/4	1,755.00	.86	15.20
CASH	LONG	50	NORWEST CP	39	1,950.00	2.97	58.00
CASH	LONG	40	PACIFIC TELESIS GP	44 5/8	1,785.00	4.88	87.20
CASH	LONG	50	PEPSICO INC NC	37 7/8	1,893.75	1.37	26.00
CASH	LONG	50	PITNEY BOWES INC	36	1,800.00	2.16	39.00
CASH	LONG	60	PROCTER & GAMBLE	49 3/8	2,962.50	2.22	66.00
CASH	LONG	40	REYNOLDS METALS CO	52 1/8	2,085.00	3.45	72.00
CASH	LONG	30	SCHERING PLOUGH CORP	56 3/4	1,702.50	2.74	46.80
CASH	LONG	30	SCHLUMBERGER LTD	67 5/8	2,028.75	1.77	36.00
CASH	LONG	30	TEXACO INC	64 1/8	1,923.75	4.99	96.00
CASH	LONG	60	TIMKEN CO	25 1/4	1,515.00	3.96	60.00

Please see reverse side for legend

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	256-70-8645	SEP 30 1992

NICK JOE BANALI II

YOUR INVESTMENTS AS OF SEPTEMBER 30 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ X YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	50	UNION CAMP CORP	45 1/4	2,262.50	3.44	78.00
CASH	LONG	50	WASTE MANAGEMENT INC	36 1/4	1,812.50	1.43	26.00
CASH	LONG	40	WHIRLPOOL CORP	37 5/8	1,505.00	2.92	44.00
CASH	LONG	50	WOOLWORTH CORP	32 3/8	1,618.75	3.45	56.00
			TOTAL VALUE OF PRICED INVESTMENTS.....		82,583.75	3.17	2,621.38

THE CUSTODIAN(S) OF THE INVESTMENTS LISTED BELOW HAVE REPORTED THAT, AS OF THE DATE SHOWN, YOUR ACCOUNT, MAINTAINED WITH SUCH CUSTODIAN REFLECTED THE FOLLOWING:

CUST.	FUND	DATE	ACCOUNT NO.	SHARES/UNITS	N.A.V.	VALUE
DWTC	DEAN WITTER/SEARS LIQUID ASSET	9-30-92	026852130	20,345	1.00	20,345.10
	TOTAL VALUE OF CUSTODIAL HOLDINGS					20,345.10

DAILY ACTIVITY DURING SEPTEMBER 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
8/31	OPENING CASH BALANCE					19,500.94CR
9/03	SOLD	40	UNILEVER PLC AMER SHARES	73 1/4	2,929.90CR	22,430.84CR
9/04	BOUGHT	60	PROCTER & GAMBLE	47 1/2	2,850.00DR	19,580.84CR
9/12	CASH DIVIDEND		PITNEY BOWES INC		9.75CR	19,590.59CR
9/14	CASH DIVIDEND		SYNTEX CORP		26.00CR	
	CASH DIVIDEND		UNION CAMP CORP		19.50CR	19,636.09CR
9/15	CASH DIVIDEND		MAY DEPARTMENT STORES		12.45CR	
	CASH DIVIDEND		WHIRLPOOL CORP		11.00CR	19,659.54CR
9/16	SOLD	8	LIN BROADCASTING	66.75	534.00CR	
	SOLD	4	MCCAW CELLULAR COMM CL A	24.75	99.00CR	20,292.54CR
9/20	CASH DIVIDEND		DOMINION RESOURCES INC VA		35.70CR	20,328.24CR
9/22	CASH DIVIDEND		LIMITED INC		5.60CR	20,333.84CR
9/23	BOUGHT	20328.00	DEAN WITTER SEARS LIQUID ASSET	1.00	20,328.00DR	5.84CR
9/25	BOUGHT	5.84	DEAN WITTER SEARS LIQUID ASSET	1.00	5.84DR	.00
9/30	CASH DIVIDEND		BENEFICIAL CORP		21.00CR	

Statement of Your Account

DEAN WITTER

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	SEP 30 1992

NICK JOE RAHALL II

DAILY ACTIVITY DURING SEPTEMBER 1992

DATE	ACTIVITY	DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
9/30	CASH DIVIDEND	PEPSICO INC NC		6.50CR	27.50CR
9/30	CLOSING CASH BALANCE				27.50CR

SUPPLEMENTAL TAX INFORMATION

	TOTAL THIS MONTH	TOTAL YEAR-TO-DATE
REPORTABLE GROSS PROCEEDS.....	5,842.96	105,099.82

THE SUPPLEMENTAL TAX INFORMATION PROVIDED ABOVE SHOULD BE USED ONLY AS A GUIDE, A COMPLETE 1099 WILL BE SENT TO YOU.

IMPORTANT MESSAGES

ONCE AGAIN, THE DEAN WITTER RECOMMENDED LIST HAS STRONGLY OUTPERFORMED THE POPULAR MARKET AVERAGES, FROM INCEPTION THROUGH JUNE 30. ASK YOUR ACCOUNT EXECUTIVE FOR A COPY OF OUR SPECIAL REPORT ON THE DEAN WITTER RECOMMENDED LIST TODAY.

IF YOU WISH TO BORROW, DEAN WITTER'S MARGIN LOAN RATE AS OF 9/30 IS 6.25% TO 8.00%

Statement of Your Account

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 100600	022	236-70-0645	AUG 31 1992

NICK JOE RAHALL II
1301 DELAWARE AVENUE SW
8409N
WASHINGTON, DC 20024

YOUR ACCOUNT EXECUTIVE:

PEAR/HANOO
DEAN WITTER REYNOLOS INC.
1850 K STREET, N.W., SUITE 900
WASHINGTON, OC 20006
TEL 202 862 9000

INCOME & CHARGE SUMMARY

DESCRIPTION	THIS MONTH	YEAR-TO-DATE
DIVIDENDS	.00	.00
INTEREST INCOME	.00	.00
MARGIN INTEREST	.00	.00
ACCRUED BOND INTEREST	.00	.00

ACCOUNT VALUATION SUMMARY

TOTAL VALUE OF PRICED INVESTMENTS	82,081.75
TOTAL VALUE OF CUSTODIAL HOLDINGS	.00
CLOSING CASH BALANCE	19,500.94CR
TOTAL ACCOUNT VALUATION	101,582.69

YOUR INVESTMENTS AS OF AUGUST 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	50	AMERICAN TEL & TELEG CO	42 1/4	2,112.50	5.12	66.00
CASH	LONG	30	AMOCO CORP	51 3/4	1,552.50	4.25	66.00
CASH	LONG	60	ARMSTRONG WORLD INDUSTRIES INC	50	1,800.00	4.00	72.00
CASH	LONG	50	AUTOMATIC DATA PROCESSING INC	45 1/8	1,293.75	1.06	13.00
CASH	LONG	50	BANK OF NEW YORK	42 1/8	2,106.25	3.60	76.00
CASH	LONG	30	BENEFICIAL CORP	63 1/2	1,905.00	4.40	84.00
CASH	LONG	40	BRISTOL MYERS SQUIBB CO	66 5/8	2,665.00	4.14	110.40
CASH	LONG	20	CSX CORP	59	1,180.00	2.57	30.40
CASH	LONG	70	FLEET FINANCIAL GROUP INC NEW	27 3/8	1,916.25	2.92	56.00
CASH	LONG	40	CIGNA CP	51	2,040.00	5.96	121.60
CASH	LONG	40	COOPER INDUSTRIES	46 7/8	1,875.00	2.64	49.60
CASH	LONG	30	DELUXE CORPORATION	42 3/8	1,271.25	3.30	42.00
CASH	LONG	60	DOMINION RESOURCES INC VA	39 3/4	2,385.00	5.98	142.80
CASH	LONG	40	EMERSON ELECTRIC CO	49 7/8	1,995.00	2.76	55.20
CASH	LONG	30	FEDERAL EXPRESS CORPORATION	38 3/8	1,151.25		
CASH	LONG	40	FLUOR CORP	40 1/4	1,610.00	.99	16.00
CASH	LONG	50	GTE CORP	34 1/4	1,712.50	5.31	91.00
CASH	LONG	40	GENERAL MOTORS CORP	34 5/8	1,385.00	4.62	64.00
CASH	LONG	50	GENUINE PARTS CO	30 1/4	1,512.50	3.30	50.00
CASH	LONG	70	GLAXO HOLDINGS PLC SPONS ADR	28 1/8	1,968.75	2.26	44.59
CASH	LONG	50	H J HEINZ CO	41 3/4	2,087.50	2.58	54.00
CASH	LONG	50	HEWLETT PACKARD	57 1/4	1,717.50	1.39	24.00
CASH	LONG	70	INGERSOLL RAND	25 1/2	1,785.00	2.74	49.00
CASH	LONG	20	INTL BUSINESS MACHINES CORP	86 5/8	1,732.50	5.58	96.00
CASH	LONG	30	ITT CORP	65 3/4	1,972.50	2.79	55.20
CASH	LONG	80	LIMITED INC	22 1/2	1,800.00	1.24	22.40
CASH	LONG	8	LIN BROADCASTING	67	536.00		
CASH	LONG	30	MAY DEPARTMENT STORES	59 1/4	1,777.50	2.80	49.80
CASH	LONG	30	MC GRAW HILL INC	57 7/8	1,736.25	3.87	67.20
CASH	LONG	4	MCCAW CELLULAR COMM CL A	24 7/8	99.50		
CASH	LONG	30	MONSANTO CO	52 3/4	1,582.50	4.24	67.20
CASH	LONG	30	J P MORGAN & CO	59 1/2	1,785.00	3.66	65.40
CASH	LONG	20	MOTOROLA INC	85 3/8	1,707.50	.89	15.20
CASH	LONG	50	NORWEST CP	36 5/8	1,831.25	3.16	58.00
CASH	LONG	40	PACIFIC TELESIS GP	43 1/8	1,725.00	5.05	87.20
CASH	LONG	50	PEPSICO INC NC	37 1/2	1,875.00	1.38	26.00
CASH	LONG	50	PITNEY BOWES INC	33 3/4	1,687.50	2.31	39.00
CASH	LONG	40	REYNOLDS METALS CO	50 3/4	2,030.00	3.54	72.00
CASH	LONG	30	SCHERING PLOUGH CORP	58 1/2	1,755.00	2.66	46.00
CASH	LONG	30	SCHLUMBERGER LTD	68 7/8	2,066.25	1.74	36.00
CASH	LONG	30	TEXACO INC	65 3/4	1,972.50	4.86	96.00

Please see reverse side for legend

Statement of Your Account

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-70-8645	AUG 31 1992

NICK JOE RAHALL II

YOUR INVESTMENTS AS OF AUGUST 31 1992

TYPE	LONG OR SHORT	QUANTITY	DESCRIPTION	MONTH END PRICE	MARKET VALUE	EST DIV RATE/ % YIELD	ESTIMATED ANNUAL INCOME
CASH	LONG	60	TIMKEN CO	27 5/8	1,657.50	3.61	60.00
CASH	LONG	40	UNILEVER PLC AMER SHARES	73 5/8	2,945.00	2.12	62.64
CASH	LONG	50	UNION CAMP CORP	43 5/8	2,181.25	3.57	78.00
CASH	LONG	50	WASTE MANAGEMENT INC	33 1/8	1,656.25	1.56	26.00
CASH	LONG	40	WHIRLPOOL CORP	35 3/4	1,430.00	3.07	44.00
CASH	LONG	50	WOOLWORTH CORP	30 1/4	1,512.50	3.70	56.00
			TOTAL VALUE OF PRICED INVESTMENTS.....		82,881.75	3.17	2,605.23

DAILY ACTIVITY DURING AUGUST 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
7/31	OPENING CASH BALANCE					.00
8/12	RECEIVED	700	SBARRO INC			
	RECEIVED	500	SILICON GRAPHIC			.00
8/14	RECEIVED	1000	CYTOGEN CP			
	RECEIVED	800	GLAXO HOLDINGS PLC SPONS ADR			
	RECEIVED	500	GT ATL & PAC TEA CO			
	RECEIVED	500	I C H PHARMACEUTICALS INC DELA			
	RECEIVED	158	LIN BROADCASTING			
	RECEIVED	84	MCCAW CELLULAR COMM CL A			
	RECEIVED	100	SYNTEX CORP			
	RECEIVED	50	UP JOHN CO			.08
8/20	JOURNAL OUT		ACCESS INCEP FEE DED		330.43DR	330.43DR
8/27	BOUGHT	70	FLEET FINANCIAL GROUP INC NEW	27.50	1,925.00DR	
	BOUGHT	50	AMERICAN TEL & TELEG CO	43.25	2,162.50DR	
	BOUGHT	30	AMOCO CORP	52.375	1,571.25DR	
	BOUGHT	60	ARMSTRONG WORLD INDUSTRIES INC	29.125	1,747.50DR	
	BOUGHT	30	AUTOMATIC DATA PROCESSING INC	44.375	1,331.250R	
	BOUGHT	50	BANK OF NEW YORK	42.375	2,118.750R	
	BOUGHT	30	BENEFICIAL CORP	65.625	1,968.750R	
	BOUGHT	40	BRISTOL MYERS SQUIBB CO	67.375	2,695.00DR	
	BOUGHT	20	CSX CORP	64.375	1,287.50DR	
	BOUGHT	40	CIGNA CP	52.375	2,095.00DR	
	BOUGHT	40	COOPER INDUSTRIES	47.375	1,895.00DR	
	SOLD	1000	CYTOGEN CP	17.50	17,500.00CR	
	BOUGHT	30	DELUXE CORPORATION	43 50	1,305.00DR	
	BOUGHT	60	DOMINION RESOURCES INC VA	40.625	2,437.50DR	
	BOUGHT	40	EMERSON ELECTRIC CO	50.00	2,000.00DR	
	BOUGHT	30	FEDERAL EXPRESS CORPORATION	40.00	1,200.00DR	
	BOUGHT	40	FLUOR CORP	40.50	1,620.00DR	

Please see reverse side for legend

Statement of Your Account

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	AUG 31 1992

NICK JOE RAHALL II

DAILY ACTIVITY DURING AUGUST 1992

DATE	ACTIVITY		DESCRIPTION	PRICE	AMOUNT	CASH BALANCE
8/27	BOUGHT	50	GTE CORP	35.375	1,768.75DR	
	BOUGHT	40	GENERAL MOTORS CORP	36.00	1,440.00DR	
	BOUGHT	50	GENUINE PARTS CO	30.125	1,506.25DR	
	SOLD	730	GLAXO HOLDINGS PLC SPONS ADR	28.125	20,530.56CR	
	SOLD	500	GT ATL & PAC TEA CO	26.25	13,124.56CR	
	BOUGHT	50	H J HEINZ CO	41.125	2,056.25DR	
	BOUGHT	30	HEWLETT PACKARD	56.50	1,695.00DR	
	SOLD	500	E C H PHARMACEUTICALS INC DELA	9.75	4,874.85CR	
	BOUGHT	70	INGERSOLL RAND	26.625	1,863.75DR	
	BOUGHT	20	INTL BUSINESS MACHINES CORP	86.625	1,732.50DR	
	BOUGHT	30	ITT CORP	66.875	2,006.25DR	
	BOUGHT	80	LENETER INC	21.125	1,690.00DR	
	SOLD	150	LIN BROADCASTING	69.00	10,350.00CR	
	BOUGHT	30	MAY DEPARTMENT STORES	60.25	1,807.50DR	
	BOUGHT	30	MC GRAW HILL INC	57.625	1,728.75DR	
	SOLD	80	MCCAW CELLULAR COMM CL A	26.00	2,080.00CR	
	BOUGHT	50	MERRIAMTS CO	54.375	1,631.25DR	
	BOUGHT	30	J P MORGAN & CO	59.50	1,785.00DR	
	BOUGHT	20	MOTOROLA INC	84.125	1,682.50DR	
	BOUGHT	50	NORWEST CP	37.50	1,875.00DR	
	BOUGHT	40	PACIFIC TELESIS GP	43.625	1,745.00DR	
	BOUGHT	50	PEPSICO INC NC	37.875	1,893.75DR	
	BOUGHT	50	PITNEY BOWES INC	34.25	1,712.50DR	
	BOUGHT	40	REYNOLDS METALS CO	53.125	2,125.00DR	
	SOLD	700	SBARRO INC	23.75	16,624.44CR	
	BOUGHT	30	SCHERING PLOUGH CORP	61.25	1,837.50DR	
	BOUGHT	30	SCHLUMBERGER LTD	68.50	2,055.00DR	
	SOLD	500	SILICON GRAPHIC	21.25	10,624.44CR	
	SOLD	100	SYNTEX CORP	29.125	2,912.40CR	
	BOUGHT	30	TEXACO INC	65.125	1,953.75DR	
	BOUGHT	60	TIMKEN CO	27.875	1,672.50DR	
	BOUGHT	40	UNILEVER PLC AMER SHARES	72.875	2,915.00DR	
	BOUGHT	50	UNION CAMP CORP	43.875	2,193.75DR	
	SOLD	50	UPJOHN CO	34.125	1,706.19CR	
	BOUGHT	50	WASTE MANAGEMENT INC	33.75	1,687.50DR	
	BOUGHT	40	WHIRLPOOL CORP	38.625	1,545.00DR	
	BOUGHT	50	WOOLWORTH CORP	30.625	1,531.25DR	
8/31	CLOSING CASH BALANCE					19,500.94CR

Please see reverse side for legend

ACCOUNT NO	AE	TAX ID NO	PERIOD ENDING
642 108600	022	236-78-8645	AUG 31 1992

NICK JOE RAHALL II

SUPPLEMENTAL TAX INFORMATION

	TOTAL THIS MONTH	TOTAL YEAR-TO-DATE
REPORTABLE GROSS PROCEEDS	100,527.62	100,527.62

THE SUPPLEMENTAL TAX INFORMATION PROVIDED ABOVE SHOULD BE USED ONLY AS A GUIDE, A COMPLETE 1099 WILL BE SENT TO YOU.

IMPORTANT MESSAGES

IN THE 12 MONTHS ENDED JUNE 30, 1992, DEAN WITTER WAS ONCE AGAIN ONE OF THE TOP TWO FIRMS IN ASSET ALLOCATION PERFORMANCE OUT OF A UNIVERSE OF TEN MAJOR INVESTMENT FIRMS, ACCORDING TO AN ONGOING QUARTERLY STUDY CONDUCTED BY THE WALL STREET JOURNAL. CALL YOUR ACCOUNT EXECUTIVE TODAY TO DISCUSS YOUR CURRENT ASSET ALLOCATION TO SEE WHETHER THE MIX YOU HAVE NOW IS RIGHT FOR YOU.

IF YOU WISH TO BORROW, DEAN WITTER'S MARGIN LOAN RATE AS OF 8/31 IS 6.50% TO 8.25%

Please see reverse side for legend

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 PM 1:14

(9)
HAND DELIVERED
MC
(Office Use Only)

JAMES MARVIN RAMSTAD
(Full Name)

2618 Crosby Road
(Mailing Address)

(202) 225-2871
Daytime Telephone

Wayzata, MN 55391

Filer Status	[X] Member of the U.S. House of Representatives	State: Minnesota District: Third	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL James M. Ramstad	**DATE (Month, Day, Year)** 5-13-93

3257

Reporting Individual's Name

JAMES MARVIN RAMSTAD

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	U.S. House of Representatives	Salary	$129,133

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

JAMES MARVIN RAMSTAD

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Health 'R' Us	Speech	Jan. 22, 1992	$1,000
	Dassel-Cokato Schools	Speech	April 11, 1992	700
	National Association of Independent Insurers	Speech	Sept. 9, 1992	500

This page may be copied if more space is required.

Reporting Individual's Name

JAMES MARVIN RAMSTAD

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X							X
	Examples: George Wash. Credit Union Accounts				X									X					
	Examples: 182 Main Street, Dover, Delaware					X							X						
	Pollution Control Revenue Bond - City of Bass Brook, MN				X									X					X
	Woodworth Farmers Group	X										X							
	Legislative Retirement Plan*				X														
	* No income derived																		

BLOCK C Income: Category of Amount of Income (X)									
None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
		X							
				X					
			X						
				X					
	X								

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: JAMES MARVIN RAMSTAD

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Farm property - North Dakota, total of 960 acres (no improvements) and						X						X											X	(gross	and net)	
undivided one-half interest in parcels totaling 800 acres (one																										
parcel with farm buildings)																										

Schedule III – Continuation

Reporting Individual's Name
JAMES MARVIN RAMSTAD

SCHEDULE IV – TRANSACTIONS

Report any purchases, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Pollution Control Revenue Bond - City of Bass Brook, MN		X		9-4-92		X					

3262

Reporting Individual's Name

JAMES MARVIN RAMSTAD

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, D, J	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Dean Witter Reynolde, Inc.	Margin Account		X					
	Norwest Bank, Wayzata, MN	Checking Account Credit Reserve	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

Reporting Individual's Name

JAMES MARVIN RAMSTAD

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	NONE						

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Reporting Individual's Name
JAMES MARVIN RAMSTAD

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board Member	United Handicapped Federation
Director	Children's Heart Fund
Advisory Board Member	Lake Country Food Bank
National Advisory Council	Hazelden Foundation

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1982 50-535A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF ...
1993 MAY 13 AM 11: 33
OFFICE OF ...
U.S. HOUSE OF REPRESENTATIVES

(6)
MC **HAND DELIVERED**
(Office Use Only)

Charles Bernard Rangel
(Full Name)

2252 Rayburn House Office Bldg.
(Mailing Address)

Washington, DC 20515
Daytime Telephone: 202 225 4365

Filer Status	[X] Member of the U.S. House of Representatives — State New York, District: 15th C.D.	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** May 13, 1993

3266

Reporting Individual's Name

Charles Bernard Rangel

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
The Church Club of New York, New York, NY	Speech	Jan. 27, 1992	250.00
Washington Tax Association, Arlington, VA	Speech	Feb. 25, 1992	1,000.00
Puerto Rico USA Foundation, Washington, DC	Speech	Feb. 26, 1992	2,000.00
Organization Management, Inc., Bethesda, MD	Speech	Feb. 29, 1992	2,000.00
American Insurance Association, Washington, DC	Speech	Dec. 10, 1992	2,000.00

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Reporting Individual's Name
Charles Bernard Rangel

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
	None	A Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX over $1,000,000	
S, DC, JT Examples: S ABC Corporation Stock			X								X									X								X
George Wash. Credit Union Accounts				X									X									X						
182 Main Street, Dover, Delaware					X							X									X							
74 West 132nd Street, NY, NY					X							X												X				
Punta Cana Beach Villa, Dominican Republic					X							X											X					
New England Mutual Life, Boston, MA				X																								

For additional assets and unearned income, use next page

Reporting Individual's Name
Charles Bernard Rangel

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	CitiBank, New York, NY	mortgage on 74 West 132nd St.			X				
	Punta Cana Beach Resort, DR	mortgage on Punta Cana Condo		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Charles B. Rangel

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Congressional Black Caucus Foundation, WDC	Feb 22-24	NYC-Orlando-WDC	Y	Y	none	N
	Pacific Community Institute of Touro College, NY,NY	Nov 6-13	NYC-Bangkok-Rangoon-NYC	Y	Y	none	N
	Center for Int'l Policy, WDC	Nov 19-20	WDC-Haiti-NYC	Y	Y	none	N

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Reporting Individual's Name
Charles Bernard Rangel

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board Member	Harlem Urban Development Corporation
Board Member	Harlem International Trade Center Corporation
Chairman of the Board	Apollo Theater Foundation

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 58-638A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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(Office Use Only)

ARTHUR RAVENEL JR
(Full Name)

635 East Bay Street
(Mailing Address)

Charleston SC 29403

Daytime Telephone: (803) 722-0174

Filer Status	[X] Member of the U.S. House of Representatives	State: SC District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** May 15, 1993

3272

Reporting Individual's Name

ARTHUR RAVENEL JR

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	STATE OF SOUTH CAROLINA	Legislative Pension	7 317
	ARTHUR RAVENEL JR & COMPANY	Management Fee	14 428
	ARTHUR RAVENEL JR & COMPANY	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

ARTHUR RAVENEL JR

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	NONE			

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Reporting Individual's Name
ARTHUR RAVENEL JR

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC JT	Examples: S	ABC Corporation Stock			X								X									X							X
		George Wash. Credit Union Accounts				X									X									X					
		182 Main Street, Dover, Delaware						X						X									X						
		Southern Nat'l Bank CharlestonSC			X										X							X							
		SC National Bank Charleston SC			X										X							X							
		Merrill Lynch Money Account			X										X							X							
		Merrill Lynch Money Account				X									X								X						
		Mortgage Note - SARET						X							X										X				
		Mortgage Note - Audubon							X						X					X									X

For additional assets and unearned income, use next page

3275

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: ARTHUR RAVENEL JR

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
527 acres Spring Grove SC								X				X					Future Development				X						
Commercial Property Union SC			X									X						X									
Audubon Apts Charleston SC	X											X									X						X
Circle K Goup Stock			X								X							X									
US Treasury Bond			X										X							X							
West Ashley Awning & Mfg Co							X				X							X									
Arthur Ravenal Jr & Co						X					X							X									
Chase Manhattan						X					X												X				
Bank of New Hampshire			X								X								X								
Chemical Banking				X							X										X						
Man Hanover					X						X												X				
TJX	X										X							X									X
Revere Fund			X								X									X							
Nature Food Ctrs	X										X								X								X
CitiCorp	X										X							X									X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: ARTHUR RAVENEL JR

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	AES Corp	X										X						X										X
	First Financial			X								X								X								X
	Old Stone Gap			X								X						X										X

Reporting Individual's Name

ARTHUR RAVENEL JR

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	TJX		X		01-02-92	X						
	Nature Food Ctrs		X		05-01-92	X						
	CitiCorp		X		07-01-92			X				
	AES Corp		X		07-01-92		X					
	First Financial	X			04-29-92	X						
	Old Stone Gap 2.40	X			06-30-92	X						
	Audubon Apartments Charleston SC		X		06-01-92					X		
	Mortgage - Audubon	X			06-01-92					X		

Reporting Individual's Name
ARTHUR RAVENEL JR

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	SC Federal Savings	Wrap Around Mortgage 55 Drake St Charleston SC	X						
	City Federal Mortgage	Wrap Around Mortgage 185 Rutledge Charleston SC		X					
	Bevia Denning	Mortgage 527 ac Spring Grove SC					X		

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

Reporting Individual's Name

ARTHUR RAVENEL JR

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
			NONE				

This page may be copied if more space is required.

Reporting Individual's Name
ARTHUR RAVENEL JR

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Arthur Ravenel Jr & Co, Charleston SC
President	West Ashley Awning & Manufacturing Co, Charleston SC
President	The Charleston Corporation, Charleston SC

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17 [illegible]

(5)

John Francis Reed
(Full Name)

1510 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: (202) 225-2735

Filer Status	[x] Member of the U.S. House of Representatives	State: Rhode Island District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

MC
HAND DELIVERED
(Office Use Only)

3282

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: John Reed	DATE (Month, Day, Year): May 14, 1993

Reporting Individual's Name
John F. Reed

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X								
	Citizens Bank - NOW Account			X										X						X										
	Fleet National Bank-Money Market				X									X							X									
	Congressional Federal Credit Union				X									X							X									
	A.G. Edwards Stock (IRA)			X								X								X										
	McDonald & Co. Invts.Stock (IRA)			X								X								X										
	Colonial Bond Fund (IRA)			X								X									X									

For additional assets and unearned income, use next page

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John F. Reed

B, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
	Fundamental Investors Fund			X								X								X									
	EVILCO Insurance Policy			X														Cash surrender	X										
	Fleet National Bank IRA			X										X					X										
	Loans to the Reed Committee						X							X					X										

Schedule III – Continuation

Reporting Individual's Name
John F. Reed

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Interest in property at 80 Knolles Way Narragansett, RI		X		6/8/92		X					

Schedule IV

Reporting Individual's Name: John F. Reed

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Fleet National Bank	Guarantor on loan to campaign		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 PM 2:01
CLERK
U.S. HOUSE OF REPRESENTATIVES

(7)

MC

LAND DELIVERY
(Office Use Only)

Ralph Regula
(Full Name)

2309 Rayburn HOB
(Mailing Address) Daytime Telephone:

Washington, DC 20515

Filer Status	[x] Member of the U.S. House of Representatives	State: Ohio District: 16	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [x]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [x]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [x]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [x]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [x]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [x]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See instructions, page 10.)	Yes [ ]	No [x]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** May 10, 1993

3287

Reporting Individual's Name

Ralph Regula

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Ohio Public Employees Retirement System	Employer-Employes Funded Retirement	4842.00
	Estate Executor Last Will and Testament, Samuel G. Myers, dated 4/18/72 and Codicil dated 8/23/78	Executor	13752.34

For payments to charity in lieu of honoraria, use Schedule II

Page 2 of 7

Schedule I

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Reporting Individual's Name

Ralph Regula

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Committee for a Responsible Fed. Budget-Am. Council on Edu. Washington, D. C.	Speech	May 20, 1992	$ 1000.00
Begner, Boyeets, Bockorney Inc. 1101 - 16th St. N.W. - Suite 500, Washington, D.C. 20036	Speech	Aug. 11, 1992	$ 1000.00

This page may be copied if more space is required.

Reporting Individual's Name

Ralph Regula

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X								X								X									X
			George Wash. Credit Union Accounts				X									X								X							
			182 Main Street, Dover, Delaware					X							X								X								
	United Bank-Debenture, Stocks and Savings, including IRA								X					X		X								X							X
	VanDorn-Stock						X							X									X								
	J.M. Smucker-Stock						X							X								X									
	Navarre Deposit Bank, Stock and savings, including IRA						X							X		X						X									

For additional assets and unearned income, use next page

Page 2 of 4 / 7

Schedule III

3290

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Ralph Regula

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Navarre Baptist Temple-Mortgage	X												X						X								
Maple Park Manor - Partnership			X										X							X							
Undivided 1/2 int. in 122 acres, Bethlehem Twp., Stark County, Ohio					X												Royalty			X							
200 acres, Bethlehem Twp., Stark County, Ohio (exclusive of residence)					X												Royalty		X								
T&C Credit Union, Canton, Ohio IRA (Savings Account)			X										X						X								
First Savings, Massillon, Ohio IRA (Savings Account)			X										X						X								
Regula Bros., Beach City, Ohio - Partnership - Livestock, Farm Equipment, Transportation Equipment					X												Partnership Distribution		X								

Schedule III—Continuation

Reporting Individual's Name
Ralph Regula

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	United Bank, Beach City, Ohio	Business Loan			x				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Ralph Regula

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 28.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner	Ragula Brothers Partnership
Trustee	Mt. Union College
Trustee	Stark Wilderness Center
Trustee	McKinley Museum

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 28.

Date	Parties To	Terms of Agreement

GPO: 1992 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 2:42
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(3)

Mel Reynolds
(Full Name)

514 Cannon H.O.B.
Washington D.C.
(Mailing Address)

Daytime Telephone: 202-225-0773

Filer Status	[✓] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office:
Report Type	[✓] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED
MC
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [✓]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [✓]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [✓]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [✓]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [✓]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [✓]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [✓]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [✓]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [✓]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See instructions, page 10.)	Yes [ ]	No [✓]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [✓]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Mel Reynolds

DATE (Month, Day, Year): 5/15/93

3294

Reporting Individual's Name: Mel Reynolds

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Education Consultant	Consulting Fees	27,000
	CITY OF CHICAGO	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name: M.L. Reynolds

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Ashland National Bank	Personal loan (Paid in full)	✓						
	Harvard University	School Expense Credit	✓						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(1)

MAY 17 PM 3:54

HAND DELIVERED

(Office Use Only)

Bill Richardson
(Full Name)

2337 California St., N.W.
(Mailing Address)

Washington, D.C. 20008

Daytime Telephone: 202-225-6190

Filer Status	[X] Member of the U.S. House of Representatives	State: NM District: 3	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978 as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: William B. Richardson

DATE (Month, Day, Year): May 17, 1993

3297

Reporting Individual's Name

Bill Richardson

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Bill Richardson

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock			X							X								X								X
		George Wash. Credit Union Accounts				X							X								X							
		182 Main Street, Dover, Delaware					X					X									X							
JT		2700 Vista Grande, NW Albuquerque, NM - condo					X					X									x (net)			x (gross)				
JT		832 Camino Chaco Santa Fe, NM							X			X										x (net)		x (gross)				

For additional assets and unearned income, use next page

Reporting Individual's Name

Bill Richardson

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	NONE											

Schedule IV

Reporting Individual's Name
Bill Richardson

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	United New Mexico Bank, Albuquerque, NM	Mortgage on rental in Albuquerque		X					
JT	Marine Midland Bank, Buffalo, NY	Mortgage on 832 Camino Chaco, SFe			X				
JT	Los Alamos National Bank, Los Alamos, NM	Mortgage on 832 C. Chaco			X				
	refinance of SFe pruperty								

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
	NONE	

Use additional sheets if more space is required.

Reporting Individual's Name
Bill Richardson

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.B.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
International Management & Development Institute, Ditchley Conf. England (speech)		Feb. 14-18	Brusaels, Belgium-London-Wash., DC	Y	Y	Spouse	2 days
Border Trade Alliance (speech)		Feb. 21-24	Albuquerque, NM-Mexico City, Mex.-Boston, Mass	Y	Y	-	-
University of the Americas (speech)		Feb. 22-23	Mexico City-Puebla, Mex.-Mexico City (by car)	Y	Y	-	-
Tomas Rivera Center (speech) Brownsville		Feb. 27-28	Wash.,DC-Brownsville, TX	Y	Y	-	-
Middlesex School (speech)		Feb. 25	Boston-Wash., DC	Y	Y	-	-
Loyola University (speech)		2/29-3/1	Denver-Los Angelea-Albuquarque	Y	Y	-	-
U.S. Mexico Border Progress (speech)		10/16-10/17	Wash.,DC-San Diego-Gallup, NM	Y	Y	-	-
Miami Conference on the Carribean (speech)		12/2-12/3	Wash.,DC-Miami-Wash., DC	Y	Y	-	-
U.S. Mexico Chamber of Commerce (speech)		12/4-12/5	Wash.,DC-Monterrey,Mex.,-Wash.,DC	Y	Y	-	-

This page may be copied if more space is required.

Reporting Individual's Name
Bill Richardson

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Member, Board of Visitors	Fletcher School of Law & Diplomacy, Tufts University
Foundation Member	University of the Americas Foundation, Inc.
Member, Board of Overseers for Athletics, Tufts University	
Advisor	Pacific Community Institute
Board Member	National Assn. of Latino Elected Officials
Chairman	Hispanic PAC USA
Advisory Board Member	Alliance for the Mentally Ill of NM
Advisory Board Member	National Organization on Fetal Alcohol Syndrome

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1992 89-536A (pb)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(5)

OFFICE OF THE CLERK
1993 MAY 17 PM 12: 28
OFFICE OF PUBLIC RECORDS
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only)

TOM RIDGE
(Full Name)

1714 Longworth Building — 202/225-5406
(Mailing Address) — Daytime Telephone

Washington DC 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: PA District: 21	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [XX]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [XX]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [XX]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [XX]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [XX]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [XX]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [XX]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [XX]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [XX]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Thomas J. Ridge	5/13/93

3304

Reporting Individual's Name
TOM RIDGE

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totaling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	ERIE COUNTY	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3305

Reporting Individual's Name
TOM RIDGE

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
	IDS Securities						X								X								X							
	Chrysler				X								X									X								
	Spectrum Control				X															X										
	Nation's Bank				X										X						X									

For additional assets and unearned income, use next page

Reporting Individual's Name
TOM RIDGE

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Marine Bank, Erie, Pennsylvania	West Palm Beach, FL-½ interest Prestwick Case #19		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more apece is required.

Reporting Individual's Name

TOM RIDGE

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Pennsylvania Bankers Assoc.	5/31-6/2	Erie, PA-Toronto, Canada-Washington, DC	N	N	None	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(9)

RECEIVED
1993 MAY 17 PM 1:31
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc (Office Use Only)

Pat Roberts
(Full Name)

2203 White Oaks Drive — 202-225-2715
(Mailing Address) — Daytime Telephone

Alexandria, Va. 22306

Filer Status	[X] Member of the U.S. House of Representatives — State: ~~Kansas~~ District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Pat Roberts — **DATE (Month, Day, Year)** 5/17/93

3309

Reporting Individual's Name
Pat Roberts

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Spouse	Commission	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3310

Reporting Individual's Name

Pat Roberts

SCHEDULE II – PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
None				

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name

Pat Roberts

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $2,500	III $2,501 - $5,000	IV $5,001 - $15,000	V $15,001 - $50,000	VI $50,001 - $100,000	VII $100,001 - $1,000,000	VIII over $1,000,000	IX	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X								X									X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	River Towers Condo, Alex. Va.						X							X											X					
	Commercial lot, Sumter, SC 1/5th interest						X													X										
	Burke Herbert Savings Bank					X									X								X							
	20th Century Mut. Fund				X								X									X								
	Nuveen Mun. Bond Trust & Fund				X								X									X								
	Merrill Lynch Fed. Securities					X							X										X							

For additional assets and unearned income, use next page

3312

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Pat Roberts

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Eaton Vance Mutual Fund			X								X									X								X
Phila Electric			X								X										X							
Byans Steak House		X																X										
Family Steak House		X																X										X
Unit Guarenteed Hotel Inv. Trust			X								X								X									
Hutton VIP Fixed Fund			X								X									X								
Perpetual (Crestar) Savings Bank (IRA)			X										X							X								

Schedule III—Continuation

3313

Reporting Individual's Name
Pat Roberts

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

B, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Eaton Vance Mutual Fund		x		12-11-92	x						
	Family Steak House		x		" "	x						
	Duplex, 2309 B Fairway Drive, Dodge City, Ks.	x			5-1-92			x				

Reporting Individual's Name
Pat Roberts

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Comerica Mortgage Co, Detroit MI	Mortgage on River Towers Condo, Alexandria, Va.		X					
	First National Bank, Dodge City, KS	Mortgage on Duplex, Dodge City, KS.			x				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Schedules V and VI

3315

Reporting Individual's Name

Pat Roberts

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Farm Credit Council	Jan 18-20	D.C. - Orlando Fla.-D.C.	Y	Y	None	N
Nat. Grain Trade Council	Feb. 6-8	DC - Naples Fla.-DC	Y	Y	Spouse	N
Congressional Charity Tennis Tournament	Mar. 6-8	DC - Greenbrier, W. Va - DC	Y	Y	Spouse	N
Chicago Bd. of Trade	Mar. 20-22	DC-Boca Raton-DC	Y	Y	Spouse	N
Nat. Ag. Chemicals Assoc.	Sep. 25-27	DC-Greenbrier, W. Va. -DC	Y	Y	Spouse	N

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Reporting Individual's Name
Pat Roberts

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
None	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 28.

Date	Parties To	Terms of Agreement
None		

GPO: 1983 89-535A (25)

PAT ROBERTS
1ST DISTRICT KANSAS

AGRICULTURE COMMITTEE
RANKING MINORITY MEMBER

HOUSE ADMINISTRATION
COMMITTEE

Congress of the United States
House of Representatives
Washington, DC 20515-1601

1128 LONGWORTH HOUSE OFFICE BUILDING
AREA CODE (202) 225-2715
FAX (202) 225-6279

LEROY TOWNS
ADMINISTRATIVE ASSISTANT

MERRY M. TOBIN
EXECUTIVE ASSISTANT

1993 MAY 26 AM 7:55
OFFICE OF THE CLERK
HOUSE OF REPRESENTATIVES

May 25, 1993

1
✓
MC

INSIDE MAIL

Mr. Donnald Anderson
Clerk of the House
Office of Records and Registration
1036 Longworth HOB
Washington, DC 20515

Dear Mr. Anderson:

Pursuant to Chief Counsel Bernard Raimo's letter dated May 21, 1993, I hereby amend my 1992 Financial Disclosure Statement, Schedule III, Assets and Unearned Income (page 5 of 9), to add the following:

Duplex, 2309 B Fairway Drive, Dodge City, KS, 67801. Valuation D ($50,000 to $100,000); Income (none); Transaction (yes).

Please file this letter as an amendment to my 1992 Financial Disclosure Statement.

Sincerely,

Pat Roberts

PR/lt
p663

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

93 MAY 17 PM 2:53

HAND DELIVERED

MC

(Office Use Only)

Honorable Timothy J. Roemer
(Full Name)

Room 415 Cannon House Office Building
(Mailing Address)

Washington, DC 20515 — Daytime Telephone: 202-225-3915

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____		[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date: ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Timothy J. Roemer

DATE (Month, Day, Year): 5/17/93

3319

Reporting Individual's Name

Hon. Timothy J. Roemer

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	NONE		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Hon. Timothy J. Roemer

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
St. Anthony Hospital, Michigan City, IN	Speech	Feb. 12, 1992	$2,000
Little Flower Church, South Bend, IN	Panel Participant	Feb. 16, 1992	$25.00

This page may be copied if more space is required.

Reporting Individual's Name
Hon. Timothy J. Roemer

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S. Government retirement programs. For rental property or land, provide the city and e street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
	House Credit Union Accounts					X									X								X							
	Notre Dame Credit Union IRA				X														NA											

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hon. Timothy J. Roemer

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	O $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
NONE																										

Schedule III—Continuation

Reporting Individual's Name

Hon. Timothy J. Roemer

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Home in Alexandria, Virginia		X		12-1-92			X				
JT	Home in South Bend, Indiana	X			05-92			X				

Reporting Individual's Name
Hon. Timothy J. Roemer

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Norwest Mortgage, Des Moines, IA	Mortgage on 1420 N. Oakhill Drive, South Bend, Indiana			X				
S	Colonial Savings & Loan, Ft. Worth, TX	Mortgage on 5203 Duke St. # 304, Alexandria, VA,			X				
		(PROPERTY SOLD DECEMBER, 1992 & DEBT DISCHARGED)							

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Reporting Individual's Name

Hon. Timothy J. Roemer

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
NONE							

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Reporting Individual's Name
Hon. Timothy J. Roemer

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
NONE	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1993 50-638A (#4)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 12

Harold Dallas Rogers
(Full Name)

2468 Rayburn House Office Building (202) 225-4601
(Mailing Address) Daytime Telephone

Washington, D.C. 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: Kentucky District: 5	[ ] Officer or Employee — Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (9)

HAND DELIVERED

(Office Use Only)

3328

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [XXX]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [XX]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [XXX]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [XXX]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [XXX]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [XXX]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [XXX]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [XXX]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [XXX]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [XXX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [XXX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Harold D. Rogers	**DATE (Month, Day, Year)** 05/07/93

Reporting Individual's Name

Harold D. Rogers

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

Harold D. Rogers

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Committee for a Responsible Federal Budget	Speech	June 10, 1992	$1,000
	UST, Inc.	Speaking	February 20, 1992	$2,000

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Reporting Individual's Name

Harold D. Rogers

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X							X
	George Wash. Credit Union Accounts				X									X					
	182 Main Street, Dover, Delaware					X							X						
	First Commerce Bancorp (holding company for Cumberland Security Bank formerly Bank of Somerset)			X								X							
	Citizens Bancshares (Formerly Citizens National Bank)									X		X							
	Southern Belle Dairy			X								None							
	IRA Prudential Securities Equity Fund				X							*Income is not received until Retirement							X
S	IRA Prudential Securities Equity Fund			X								*Income is not received until Retirement							X
	Congressional Federal Credit Union					X								X					

BLOCK C Income: Category of Amount of Income (X)									
	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000
Asset			X						
Asset					X				
Asset				X					
Asset		X							
Asset						X			
Asset	X								
Asset	X								
Asset	X								
Asset			X						

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Harold D. Rogers

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	24 6th St,, S.E., Washington,D.C.	X											X											X				

3332

Reporting Individual's Name: Harold D. Rogers

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Citizens National Bank - IRA		X		May 19,1992		X					
S	Citizens National Bank - IRA		X		May 19,1992	X						
	Prudential Securities Equity Fund - IRA	X			May 19,1992		X					
S	Prudential Securities Equity Fund - IRA	X			May 19,1992	X						

3333

Reporting Individual's Name
Harold D. Rogers

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Citizens National Bank of Somerset, KY	Home Mortgage on 309 College Street, Somerset, KY		XX					
JT	Citicorp Mortgage, Inc. of St. Louis, MO	Home Mortgage on 24 6th St.S.E. Washington, D.C.				XX			
JT	Dallas Wood - Alexandria, VA	Home Shared Equity on 24 6th St. S.E., Washington, D.C.		XX					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
none		

Use additional sheets if more space is required.

Reporting Individual's Name
Harold D. Rogers

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director (Unpaid)	Citizens Bancshares, Inc., Somerset, KY

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO: 1988 50-536A (pm)

Reporting Individual's Name

Harold D. Rogers

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Eagle Invitational Golf Tournament	2-8-92 to 2-11-92	Lexington, KY - Palm Beach, Florida - Lexington, KY	Y	Y	Son	1 day
	NBC and Mutual Network Advisory Boards Fall Meeting	11-7-92 to 11-10-92	Lexington, KY - Bermuda - Lexington, KY	Y	Y	Spouse	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 APR 30 AM 10: 37
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (3)
MC
(Office Use Only)

3337

(Full Name) DANA TYRONE ROHRABACHER

(Mailing Address) 1027 Longworth H.O.B.

Washington, DC 20515-0545

Daytime Telephone (202) 225-2415

Filer Status: [X] Member of the U.S. House of Representatives — State: CA District: 42nd / [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) [ ] Amendment [ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Dana Rohrabacher

DATE (Month, Day, Year): April 27, 1993

Reporting Individual's Name
ROHRABACHER, DANA

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	a	ABC Corporation Stock			X							X								X									X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
SCE stock (held in IRA)					X								X									X								
Dean Whitter Liquid Asset Fund (IN IRA)					X								X								X									
Dean Whitter Liquid Asset Fund (NOT IRA)				X									X								X									
WR Grace Stock					X								X								X									

For additional assets and unearned income, use next page

Schedule III

3338

Reporting Individual's Name: ROHRABACHER, DANA

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Hanns Seidel Foundation	Dec. 16-19 1992	Los Angeles - Santa Barbara - Los Angeles	Y	Y	NONE	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & ...
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CLERK, U.S. HOUSE OF REPRESENTATIVES

(6)

MC HAND DELIVERED
(Office Use Only)

Carlos Romero-Barcelo
(Full Name)

1517 Longworth
(Mailing Address)

(202) 225-2615
Daytime Telephone.

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date: ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	[X]	No	[ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes	[ ]	No	[X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	[X]	No	[ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	[ ]	No	[X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	[X]	No	[ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes	[ ]	No	[X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes	[ ]	No	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). This Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Carlos Romero-Barcelo	**DATE (Month, Day, Year)** 05/12/93

3340

Reporting Individual's Name

Carlos Romero-Barcelo

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Law Office of Romero-Barcelo, Del Toro & Santana	Partner Draw	$62,355.37
	Commonwealth of Puerto Rico	Pension	$25,300.00
	Real Estate	Commissions	$19,898.51

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
Carlos Romero-Barcelo

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X									X
			George Wash. Credit Union Accounts				X								X									X							
			182 Main Street, Dover, Delaware					X						X									X								
	Apartment at Washington Plaza, P.R.								X					X												X					
	Individual Retirement Account					X													N/A												
	U.S. Treasury Bond Strips					X									X								X								
	Puerto Rico-7, Inc. - stocks							X					X							X											
	Virgin Island-7, Inc. - stocks				X								X							X											

For additional assets and unearned income, use next page

3342

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Carlos Romero-Barcelo

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Royal Bank (Savings Account)			X										X						X									
	Ponce Federal Bank (Stocks)			X																									

Schedule III—Continuation

3343

Reporting Individual's Name: Carlos Romero-Barcelo

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Puerto Rico Home Mortgage	Mortgage on 57 Washington, San Juan				X			
JT	Roig Commercial Bank	Commercial Loan		X					
JT	Citibank	Credit Line		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Carlos Romero-Barcelo

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization	
President	RHR Real Estate Inc.	Uncompensated
President	RGR Landmarks Inc.	Uncompensated
Incorporator	Fundacion Romero Donnelly	Uncompensated
Secretary	Virgin Island-7, Inc.	Uncompensated
Secretary	Puerto Rico-7, Inc.	Uncompensated

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 O-235A (PN)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 PM 2:23
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
FINANCIAL DISCLOSURE

MC (4)
(Office Use Only)

Ileana Ros-Lehtinen
(Full Name)

127 Cannon House Office Building — 202-225-3931
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: 18	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [XX]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Ileana Ros-Lehtinen

DATE (Month, Day, Year): May 14, 1993

3346

Reporting Individual's Name

Ileana Ros-Lehtinen

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	U.S. Department of Justice	Spouse Salary	NA
	Spencer and Klein, P.A.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Ileana Ros-Lehtinen

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X								X									X										X
			George Wash. Credit Union Accounts				X									X									X								
			182 Main Street, Dover, Delaware					X							X									X									
JT	Professional Savings Bank				X											X							X										
	90 West 11th Street Inc. Since 1993 I no longer own this.						X														X												
S	Mega Bank Stock Miami, FL				X																X												
	Community Bank, Homestead, FL 2IRA/CD				X											X						X											
	Florida State Retirement Plan				X																X												
	Spouse				X																X												

For additional assets and unearned income, use next page

Schedule III

3348

Reporting Individual's Name

Ileana Ros-Lehtinen

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director (unpaid)	90 West 11 Street, Inc.
	I no longer form part of this organization as of Jan.31, 1992.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 — 58-534A (PH)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

1993 MAY 21 AM 9:04

Ileana Ros-Lehtinen (Full Name)

127 Cannon House Office Building (Mailing Address) — 202-225-3931 (Daytime Telephone)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Florida District: 18	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

MC (4)

HAND DELIVERED

(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Ileana Ros-Lehtinen — DATE (Month, Day, Year): May 17, 1993

3350

Reporting Individual's Name

Ileana Ros-Lehtinen

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	U.S. Department of Justice	Spouse Salary	N/A
	Dexter Lehtinen, Attorney At Law	Spouse Income	N/A

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Ileana Ros-Lehtinen

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
B, DC, JT	Examples:	S	ABC Corporation Stock			X								X									X								X
			George Wash. Credit Union Accounts				X									X									X						
			182 Main Street, Dover, Delaware					X							X									X							
JT	Professional Savings Bank					X										X							X								
	90 West 11th Street, Inc Since 1993, I no longer own this.						X							X							X										
S	Mega Bank Stock, Miami FL					X								X							X										
	Community Bank, Homestead, FL 2 IRA/CD					X										X						X									
	Florida State Retirement Plan					X															X										
	Spouse					X															X										

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name
Ileana Ros-Lehtinen

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director (unpaid)	90 West 11th Street, Inc. I no longer form part of this organization as of early 1992.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 50-535A (pm)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 AM 9 49
CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only)

Charles Grandison Rose, III
(Full Name)

H-326, The Capitol
(Mailing Address)

(202) 225-2061
Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: NC District: 7th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Charles Grandison Rose III

DATE (Month, Day, Year) May 13, 1993

3854

Reporting Individual's Name
Charles Grandison Rose, III

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Smokeless Tobacco Council	Speech	March 11, 1992	$1000
National Council of Farmer Cooperatives	Speech	March 11, 1992	$1000
Xerox	Speech	March 31, 1992	$2000
The Connell Company	Speech	June 8, 1992	$2000
Nueva Revista	Article	Sept. 30, 1992	$ 500

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Reporting Individual's Name

Charles Grandison Rose, III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X									X								X
			George Wash. Credit Union Accounts			X									X									X						
			182 Main Street, Dover, Delaware				X							X									X							
			1 Intereat in Bald Head Island, NC Condo				X							X											X					
			Cascada Mtn., VA ski lot, 3/4 acrs		X															X										
			Congressional Federal Credit Union			X									X								X							
			Wachovia Bank and Truet Accounts			X									X								X							
			Home Federal Savings	X											X					X										

For additional assets and unearned income, use next page.

Reporting Individual's Name: Charles Grandison Rose, III

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Paoplé's Federal Savings and Loan, Southport, NC	Mortgage on Bald Head Island, NC				X			
		Condo (½ interest)							

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Charles Grandison Rose, III

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	The Keystone Center (speech)	Jan. 6-8, 1992	Wash., DC-Aspen-Raleigh	Y	Y	Spouse	N
		(spouse: Jan. 6-9, 1992)	(spouse return to Wash., D.C.)				
	The Connell Company (speech)	June 8, 1992	Wash., DC-Westfield, NJ-Wash., DC	N	Y	None	N
	Pesticide Association of North Carolina (speech)	Aug. 26, 1992	Wilmington, NC-Raleigh, NC-Wilmington, NC	N	Y	None	N

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Reporting Individual's Name
Charles Grandiaon Rose, III

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Honorary Chairman	The Caps Fear Charitable Foundation

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 50-336A (pg)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 20 PM 10 10

MAY 17 1993

MC (13)
(Office Use Only)

DAN ROSTENKOWSKI
(Full Name)

2111 RAYBURN HOUSE OFFICE BUILDING
(Mailing Address)

WASHINGTON, DC 20515

Daytime Telephone: 202-225-4061

Filer Status: [X] Member of the U.S. House of Representatives — State: Illinois District: 5 — [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15) — [ ] Amendment — [ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [X]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [X]	No [ ]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Dan Rostenkowski

DATE (Month, Day, Year): May 17, 1993

3360

Reporting Individual's Name

Dan Rostenkowski

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Confidence Insurance Agency, Inc.	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Dan Rostenkowski

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

Source		Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
SEE SCHEDULE #1 ATTACHED				

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
Dan Rostenkowski

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column The column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	Less than $1,001	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X								X									X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X								X								
	SEE SCHEDULE #2, ATTACHED																													

For additional assets and unearned income, use next page

3363

Reporting Individual's Name
Dan Rostenkowski

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	SEE SCHEDULE #3, ATTACHED											

3364

Reporting Individual's Name
Dan Rostenkowski

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NONE								

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
SEE SCHEDULE #4, ATTACHED		

Use additional sheets if more space is required.

Reporting Individual's Name
Dan Rostenkowski

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
SEE SCHEDULE #5, ATTACHED							

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DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #1 - PART IB - PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

SOURCE	ACTIVITY	DATE	AMOUNT TO CHARITY
Academic Health Centers	speech	9/10/92	$2000
American Assn. of Equipment Lessors	speech	5/11/92	$2000
American Group Practice Association	speech	4/2/92	$2000
American Institute of Architects	speech	1/22/92	$2000
American Nephrology Nurses	speech	5/3/92	$2000
American Society of Assoc. Executives	speech	3/11/92	$2000
Associated Merchandising Corp.	speech	4/26/92	$2000
Blue Cross/Blue Shield	speech	8/26/92	$2000
Building Owners and Managers Assoc.	speech	9/14/92	$2000
Building Owners and Managers Assoc.	speech	12/7/92	$2000
Burson-Marsteller	speech	7/28/92	$2000
CEO Tax Study Group	speech	12/4/92	$2000
Chicago Medical Society	speech	2/29/92	$2000
Coalition Against Regressive Taxation	speech	7/9/92	$2000
Committee for Responsible Government	speech	12/8/92	$2000
Employee Benefits Institute	speech	4/8/92	$2000
Employee Retirement Income Security Act Industry	speech	3/5/92	$2000
Fidelity Management Trust Company	speech	5/7/92	$2000
Futures Industry Association	speech	3/21/92	$2000
Greater North Michigan Avenue Assoc.	speech	2/3/92	$500
Highway Users Federation	speech	2/25/92	$2000
Int. Assn. Financial Planners	speech	5/20/92	$2000
International Bankers	speech	12/9/92	$2000
Invest to Compete Alliance	speech	7/22/92	$2000
KPMG Peat Marwick	speech	10/5/92	$2000
Metropolitan Life Insurance	speech	8/11/92	$2000
Midwest International Wine Expo	speech	10/19/92	$2000
Mortgage Bankers Association	speech	3/3/92	$2000
National Association of Business Economists	speech	2/26/92	$2000
National Association of Truck Stop Operators	speech	5/4/92	$2000
National Cooperative Business Assoc.	speech	4/8/92	$2000
National Electrical Mfgrs. Assoc.	speech	11/16/92	$2000
National Fisheries Institute	speech	4/30/92	$2000
National Food Processors Association	speech	1/30/92	$2000
National Realty Committee	speech	12/2/92	$2000
Northern Trust Company	speech	3/30/92	$2000
Philip Morris, Inc.	speech	8/5/92	$2000
Public Securities Assoc.	speech	9/24/92	$2000
Society of Actuaries	speech	4/6/92	$2000
Washington Research Group	speech	11/12/92	$2000
Western Regional Council	speech	12/11/92	$2000

DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #2 - PARTS II & III - ASSETS AND "UNEARNED" INCOME - PAGE 1 of 2

BLOCK A	BLOCK B	BLOCK C	BLOCK D
National Security Bank of Chicago	B	Interest-II	
S-First National Bank of Chicago - IRA	B	Interest-II	
First National Bank of Chicago - IRA	C	Interest-II	
S-American National Bank - IRA	C	Interest-III	
American National Bank - IRA	C	Interest-III	
East New York Savings Bank	C	Interest-III	
S-Andy Frain Services Stock	D	Interest-V	
S-Security Federal Savings & Loan	B	Interest-II	
S-Northwestern Savings & Loan	D	Interest-IV	
Commonwealth Edison (Bonds) **	D	Interest-III	X
Eastman Kodak Company Notes **	C	Interest-III	
Philip Morris Companies, Inc. Notes **	C	Interest-IV	
Sears Credit Cards Series 1990 B **	C	Interest-III	
CD Sears Savings Bank **/*	NONE	Interest-III	X
Athlone, Inc.	C	Dividend-IV	
Deluxe Corporation	D	Dividend-III	
Qualified Blind Trust	n/a	Qualified Blind Trust-V	
S-Vanguard Fixed Income Securities Fund-GNMA Portfolio	C	Dividend-III	
S-Cash Accumulation Trust Natl. Money Market Fund	B	Dividend-I	
S-Helene Curtis Industries, Inc.	B	Dividend-I	
S-McDonalds Corp.	B	Dividend-I	
S-Prudential Bache MultiSector Fund Class B	B	Dividend-II	
S-Prudential Bache MultiSector Fund Class B (same asset as above)	B	Capital Gain II	
S-Wal Mart Stores, Inc.	B	Dividend-I	
S-Waste Management Inc.	C	Dividend-II	
S-BP Prudhoe Bay Royalty Trust Units	B	Royalty-II	
S-To The Rescue, Inc.	B	None	X
Anheuser Busch Companies **	C	Dividend-I	X
BlackRock Advantage Term Trust **	C	Dividend-III	X
Bristol Myers Squibb Company **	C	Dividend-II	X

DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #2 - PARTS II & III - ASSETS AND "UNEARNED" INCOME - PAGE 2 of 2

BLOCK A	BLOCK B	BLOCK C	BLOCK D
CAT Natl. Money Market Fund **	B	Dividend-I	
CAT Natl. Government Fund **	C	Dividend-III	
FPL Group, Inc. **	B	Dividend-II	X
Hartford Steam Boiler **	B	Dividend-II	
LG and E Energy Corp. **	C	Dividend-II	X
Long Island Lighting Co. **	B	Dividend-II	X
Merck and Company **	C	Dividend-II	X
J. P. Morgan & Company **	C	Dividend-II	X
New York State Electric & Gas **	B	Dividend-II	X
Northeast Utilities **	B	Dividend-II	X
Pepsico, Inc. **	B	Dividend-I	
Prudential-Bache MultiSector Fund Cl.B **	C	Dividend-II	
Prudential-Bache MultiSector Fund Cl.B ** (same asset as above)	C	Capital Gain-III	
Public Service Enterprise Group **	B	Dividend-II	
Templeton Global Utilities, Inc. **	B	Dividend-II	
Templeton Global Utilities, Inc. ** (same asset as above)	B	Capital Gain-I	
Union Electric Company **	B	Dividend-II	
Egyptian Trotting Association Stock	B	NONE	
GST Laboratories Stock	A	NONE	
Equity Ownership in Ridgemoor CC	B	NONE	
Rental Property, located at Evergreen & Noble Streets, Chicago, IL	E	RENTS-V	
1/2 Interest in Lot #26, Unit 6,ID #36-24-16--0010-5800-000D, Pasco County, FL	C	NONE	
Hernando County, Block Unit 20, Lots 7-14, Spring Hills, FL	D	NONE	
Collier County, #49801200002, Marco Island, FL	C	NONE	
2158 N. Damen Ave., Chicago, IL	C	NONE	
NE Corner Blackhawk & Noble Streets, Chicago, IL	B	NONE	
1362 W. Evergreen, Chicago, IL	B	NONE	
Corner of Ada & Evergreen, Chicago, IL	B	NONE	
Corner of Haddon & Noble St., Chicago, IL	B	NONE	

* Indicates all shares of stock were sold or the ending balance was zero on 12/31/92
** Indicates item in Prudential Securities Account (Keogh Plan)

DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #3 - PART IV - TRANSACTIONS

IDENTIFICATION OF ASSETS	TRANSACTION TYPE /	DATE	AMOUNT
Blackstone Advantage Term Trust (old name)**			
BlackRock Advantage Term Trust (new name) **	Exchange	1992	none
S-Blackstone Advantage Term Trust	Sold	1/27/92	B
S-Vanguard Municipal Bond Fund - Intermediate Term Portfolio	Sold	1/27/92	B
S-To the Rescue, Inc. (S Corporation)	Purchased	1/30/92	B
S-Allied Waste Industries *	Purchased	6/8/92	B
Anheuser Busch Companies **	Purchased	11/13/92	B
Bristol Myers Squibb Company **	Purchased	11/13/92	B
Commonwealth Edison** (bonds)	Purchased	5/19/92	D
CD Sears Savings Bank**	Sold	5/18/92	C
FPL Group, Inc. **	Purchased	11/7/92	B
LG and E Energy Group **	Purchased	1/7/92	B
Long Island Lighting Co. **	Purchased	1/7/92	B
Merck and Company **	Purchased	1/7/92	C
Merck and Company **	Purchased	11/13/92	B
J. P. Morgan & Company **	Purchased	1/7/92	B
New York State Electric & Gas **	Purchased	1/7/92	B
Northeast Utilities **	Purchased	1/7/92	B

* Indicates item valued at less than $1000 on 12/31/1992
** Indicates item in Prudential Securities Account (Keogh Plan)

DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #4 - PART VI - TANGIBLE GIFTS
(GIFTS OTHER THAN TRANSPORTATION, LODGING, MEALS, ENTERTAINMENT)

SOURCE	BRIEF DESCRIPTION	VALUE
Danny Thompson Memorial Golf Tournament	Golf Clothing & Accessories	under $250

DAN ROSTENKOWSKI

ETHICS IN GOVERNMENT ACT - FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992

SCHEDULE #5 - PART VII - FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

SOURCE	DATES	POINT OF DEPARTURE-DESTINATION(S)-POINT OF RETURN	LODGING? (Y/N)	FOOD? (Y/N)	WHICH FAMILY MEMBER INCLUDED?	ANY TIME NOT AT SPONSOR'S EXPENSE
American Horse Council (speech)	5/1-5/3	Chgo/Lexington/Chgo	Y	Y	SPOUSE	NONE
Chicago Medical Society (speech)	2/27-3/3	DC/Chgo/DC	N	N	NONE	5 DAYS
Danny Thompson Memorial (charity tournament)	8/20-23	Chgo/Idaho/Chgo	Y	Y	NONE	NONE
Futures Industry Assn. (speech)	3/19-3/21	DC/W.Palm Beach/Chgo	Y	Y	NONE	NONE
KPMG Peat Marwick (speech)	10/5	DC/Chgo/DC	N	N	NONE	NONE
Northern Trust Co. (speech)	3/29-3/31	Chgo/Palm Springs/Wash	Y	Y	NONE	1 DAY
Society of Actuaries (speech)	4/3-4/6	Chgo/Las Vegas/Newark*	Y	Y	SPOUSE	NONE
Tooling & Mfgr. Association (speech)	3/5-3/11	DC/Chgo/DC	N	N	NONE	6 DAYS
Washington Research Group (speech)	11/12	Chgo/DC/Chgo	N	N	NONE	NONE
Western Regional Council (speech)	12/10-12/11	DC/Phoenix/DC	Y	Y	NONE	NONE

* SPOUSE - CHGO/LAS VEGAS/CHGO

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 1:21
HAND DELIVERED
MC
(Office Use Only)

(a)

Toby Roth
(Full Name)

9624 Locust Hill Drive
(Mailing Address)

202-225-5665
Daytime Telephone

Great Falls VA 22066

Filer Status	[X] Member of the U.S. House of Representatives — State WI, District 8	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
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Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

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SIGNATURE OF REPORTING INDIVIDUAL — **DATE (Month, Day, Year)** 5/13/93

3373

Reporting Individual's Name

Toby Roth

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
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	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

TOBY ROTH

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
SECURA COMPANIES, APPLETON WISCONSIN	DIRECTORS FEES	1992	$ 7000.00
ALL ABOVE EARNINGS WERE DONATED			
BY THE RESPECTIVE ENTITY	DIRECTLY TO CHARITIES		

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3375

Reporting Individual's Name

Tony Rotel

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	Block D Transaction (X)
Examples: S	ABC Corporation Stock			X								X									X								X
Examples:	George Wash. Credit Union Accounts				X								X										X						
Examples:	182 Main Street, Dover, Delaware					X						X										X							
JT	739 S FAIRVIEW - APPLETON WI				X							X											X						
JT	972-74 10th ST - MENASHA WI					X						X												X					X
JT	1734-36 E AMELIA ST APPLETON WI				X							X												X					
JT	1346-48 Hughes Ave MENASHA WI					X						X												X					X
JT	1625 W WISCONSIN AVE APPLETON WI				X							X											X						
JT	1521 W BAMPER AVE APPLETON WI						X					X													X				

For additional assets and unearned income, use next page

Schedule III

3376

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Toby Roth

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
JT	417-19 E. Longview Dr Appleton WI				X							X										X						
JT	Certain Bank Great Falls MT				X								X							X								
S	Congressional Credit Union				X								X						X									
S	North Shore Bank Green Bay WI		X										X						X									
JT	United Airlines Stock			X														X										X

Schedule III—Continuation

3377

Reporting Individual's Name

TODY ROTH

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				
JT	974-72 IDA ST MENASHA WI		X		8-18-92			X				
JT	1366-68 HOME AVE MENASHA WI		X		11-18-92			X				
JT	UNITED AIRLINE STOCK (AIR WISCONSIN)			X	2-20-92	X						

Schedule IV

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Reporting Individual's Name: Toby Roth

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	First Wisconsin Bank, Appleton WI	Mortgage on 1366-68 Home Ave Appleton WI		X					
	(Indebtedness was satisfied and discharged upon sale of property on 11-18-92)								

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Tony Roth

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Council for National Policy	Feb 8-9	Wash DC — Ft Lauderdale-Green Bay	Y	Y	None	N

This page may be copied if more space is required.

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Reporting Individual's Name
TOBY ROTH

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 26.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
DIRECTOR	SECURA COMPANIES

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1993 50-633A (m)

3382

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(6)

1993 MAY 17 PM 12:04

HAND DELIVERED

MC

(Office Use Only)

Margaret Roukema
(Full Name)

249 Greenway Road
(Mailing Address)

Ridgewood, New Jersey 07450

Daytime Telephone: 202-225-4465

Filer Status	[X] Member of the U.S. House of Representatives	State: New Jersey District: 5	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	[X]	No	[ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes	[ ]	No	[X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	[X]	No	[ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	[X]	No	[ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	[ ]	No	[X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes	[ ]	No	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes	[ ]	No	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Margaret S. Roukema	5/13/93

Reporting Individual's Name

Margaret Roukema

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	University of Medicine and Dentistry - New Jersey	Spouse Salary	N/A
	Medical Practice	Spouse Schedule C	N/A

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Margaret Roukema

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None."

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples.	B	ABC Corporation Stock			X							X									X							X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
	Ridgewood Savings					X									X							X							
JT	National Community Bank					X									X							X							
JT	Jefferson Parish, LA IDA Mtge. 4/1/12						X								X								X						
S	DLJ Penn Eight LP				X										X					X									
JT	Alliance Tax Exempt Fund						X								X								X						
JT	Piedmont Muni Power Agency 1/1/22						X								X								X						

For additional assets and unearned income, use next page

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Margsret Roukema

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Souix City IA Hosp Rev 7/1/94				X									X									X					
JT	Bergen City Utils Auth Pul.Chtr 12/15/99			X										X							X							X
JT	Bristol Meyera Square Co			X								X									X							X
JT	Comcast Corp CL A			X								X							X									
JT	Merck & Co Inc.			X								X									X							X
JT	Proctor & Gamble			X								X									X							
JT	Single Family Residence, Warren VT						X						X						X									
	Congressional Federal Credit Union			X										X						X								
S	University of Medicine & Dentistry - 401K							X						X											X			
	National Community Bank - IRA			X										X						X								
S	National Community Bank - IRA			X										X						X								
JT	Johnson & Johnson	X										X							X									X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Margaret Roukema

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
		Year End Value (X)										Type of Income (X)							Category of Amount of Income (X)									
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	Transaction (X)
	S	Keough Plan-Prudential Securities:																										
		Blackrock Strategic Term Trust				X						X										X						
		P B Equity Income Fund				X						X										X						
		Tandon Corp/TSL Holdings		X								X							X									
		Prudential Aquisition Fund 1 LP			X									X						X								
		Prime Plus Realty Ptrs LP			X								X							X								
		Virginia Elec. Power Co.	X											X							X							X
		Prudential MMA			X									X							X							
		CD Maryland National Bank			X									X							X							
		Blackrock 1998 Term Trust				X						X										X						
		Phillip Morris Inc.			X							X									X							
		Public Service Enterprise Group			X							X									X							
		AIM Weingarten			X							X								X								X
		Blackrock Invest Quality Term Trust			X							X									X							X
		Zweig Apprec. Fund CL A			X							X							X									X
		Becton Dickinson			X							X								X								X

Reporting Individual's Name: Margaret Roukema

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	Bergan Cty Utils Auth Poll Cntr 12/15/99	X			12-29-92		X					
JT	Johnson & Johnson Common Stock		X		2-18-92	X						
JT	Bristol Meyers Squibb Common Stock	X			6-4-92 3-5-92	X X						
JT	Merck & Co Inc. Common Stock	X			3-5-92		X					
S	Prudential Securities - Keough Account:											
	-AIM Weingarten Fund	X			4-23-92	X						
	-Virginia Elec & Power - 7/1/08 9.62%		X		3-25-92	X						
	-Blackrock Investment Quality Term Trust	X			4-30-92	X						
	-Zweig Appreciation Fund Class A	X			4-30-92	X						
	-Becton Dickinson Common Stock	X			12-31-92	X						

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

OFFICE OF RECORDS & REGISTRATION
1993 MAY 17 AM 9 52
CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 14 1993

J. Roy Rowland
(Full Name)

423 Cannon House Office Building
(Mailing Address) Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Georgia District Eighth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

MC (Office Use Only)

8

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? If yes, Complete and Attach Schedule I.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, Complete and Attach Schedule VI.	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach Schedule II.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, Complete and Attach Schedule VII.	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, Complete and Attach Schedule III.	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach Schedule VIII.	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, Complete and Attach Schedule IV.	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach Schedule IX.	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, Complete and Attach Schedule V.	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 14, 1993

3388

Reporting Individual's Name

J. Roy Rowland

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Medical Arts Center, Inc., Dublin, GA	Director's fee (spouse)	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

J. Roy Rowland

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug 13, 1992	$500
Florida Medical Association, Jacksonville, Florida	Speech	January 12, 1992	$1,000
Tobacco Institute, Washington, D.C.	Speech	January 28, 1992	$2,000
E.I. DuPont De Nemoura & Company, Wilmington, Delaware	Speech	Feb. 14-16, 1992	$1,000
National Cotton Council of America, Memphis, Tennessee	Speech	Feb. 10, 1992	$2,000
Reynolds, Beeby & Magnuson, P.C., Detroit, Michigan	Speech	Feb. 28, 1992	$1,000
Florida Osteopathic Medical Association, Tallahassee, Fl.	Speech	March 13-14, 199[illegible]	$1,000
Association of Metropolitan Water Agencies, Washington,DC	Speech	March 18, 1992	$1,000
Phillip Morris Companies, Inc., Washington, D.C.	Speech	May 12, 1992	$2,000
Taft, Stettinus and Hollister, Cincinnati, Ohio	Speech	June 9, 1992	$1,000
Diversion Magazine, New York, New York	Article	July 22, 1992	$ 850

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Reporting Individual's Name

J. Roy Rowland

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source'			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
S	Farmers and Merchants Bank Dublin, GA					X									X								X							
JT	National Bank of GA, N.A. Atlanta, GA					X									X							X								
JT	Paine Webber, Inc. Weehawken, N.J.						X						X										X							
	Medical Center (A Partnership) Dublin, GA		X																compensation for equity in partnership					X						

For additional assets and unearned income, use next page

Reporting Individual's Name: J.Roy Rowland

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Farm (46 Acres) Laurens Co., GA				X													N/A	X										
	Farm (212 Acres) Johnson Co., GA					X												N/A	X										
S	Dublin Medical Arts Center, Inc.					X												N/A	X										
	Dublin, GA Common Stock																												
	J-Mal, Inc., Dublin, GA Common Stock					X												N/A	X										
S	IRA - NationsBank, Dublin, GA			X														N/A	X										
	IRA - NationsBank, Dublin, GA				X													N/A	X										
	SEP (Simplified Employee Pension)				X													N/A	X										
	NationsBank, Dublin, GA																												
	Keogh (Medical Center) NationsBank						X											N/A	X										
	Atlanta, GA																												

Reporting Individual's Name

J. Roy Rowland

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Florida Medical Association	Jan. 10-13	Washington,DC Ponte Vedra	Y	Y	Spouse	N
(Speech)		Bch, Fla. - Wash., D.C.				
Coca Cola Company	Feb. 13-14	Atl, GA - N.Y. City, N.Y.	Y	Y	None	N
(Speech)		Wash., D.C.				
E.I. Dupont DeNemoura & Co.	Feb. 14-16	Atl, GA - Orlando, FL	Y	Y	Spouse	N
(1992 Annual Meeting)		Atl, GA				
American Medical Association	Feb 27 - March 1	Wash., D.C. Palm Beach, FL	Y	Y	Spouse	N
(Speech)		Washington, D.C.				
American Bar Association	Feb. 28	Palm Beach, FL - Marco	Y	Y	Spouse	N
(Speech)		Island - Palm Beach, FL				
Florida Osteopathic Med. Assoc.	March 11-14	Wash., D.C. - Miami Beach	Y	Y	Spouse	N
(Speech)		FL - Atlanta, GA				
Danny Thompson (Charitable Golf Tournament)	Aug. 19-22	Atl, GA, Salt Lake City, UT	Y	Y	Spouse	N
		Private plane to Sun Valley Washington, D.C.				

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Reporting Individual's Name

J. Roy Rowland

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Coordination Council for		Nov. 28 - Dec. 5	Atl., GA - L.A. Calif. to	Y	Y	Spouse	N
N. American Affairs Office			D.C. Dulles, Leave Taipai,				
in U.S.A.			Taiwan - L.A. Calif. to				
(Fact Finding - China Trip)			Washington, D.C.				
Delta Airlines		Aug 23-26	Salt Lake City, Utah to Washington, D.C.	Y	Y	Spouse	N

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Reporting Individual's Name

J. Roy Rowland

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Retired Partner	Medical Center, Dublin, GA, (withdrew from partnership on February 29, 1992)
Director	J-Mal, Inc., Dublin, GA

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
Sept 1, 1982	Medical Center, Dublin, GA	On Sept. 1, 1982, member withdrew and retired from the partnership (Medical Center, Dublin, GA) Pursuant to agreement member will be reimbursed from equity by participating in division of partnership earnings (based on a point system adopted by said partnership) and also participate in the partnership retirement (Keogh) Plan through February 29, 1992.

GPO: 1992 50-838A (pm)

3395

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 1:34
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(7)

Lucille Roybal-Allard
(Full Name)

324 Cannon HOB
(Mailing Address)

(202) 225-1766
Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Calif. District: 33rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

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(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended [5 U.S.C. app. 6, § 101 et seq.]. The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Lucille Roybal-Allard	**DATE (Month, Day, Year)** May 16, 1993

3396

Reporting Individual's Name
Lucille Roybal-Allard

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	California State Assembly	Legislative Salary	$40,265
	California State Assembly	Legislative Per Diem	$22,860
	Allard and Associates	Spouse's Consulting Fees	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
LUCILLE ROYBAL-ALLARD

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
New Member---Not Reportable				

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Reporting Individual's Name
Lucille Roybal-Allard

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT — Examples: S — ABC Corporation Stock			X									X							X
George Wash. Credit Union Accounts					X									X					
182 Main Street, Dover, Delaware						X							X						
JT	449 S. Virginia Ave. Pasadena, CA 91107							X					X						
S	Navy Fed. Credit Union, Wash. DC					X								X					
S	Bank of America Monterey Park, CA					X								X					
JT	Golden 1 Credit Union Sacramento, CA		X											X					

BLOCK A Asset and/or Income Source	BLOCK C Income: Category of Amount of Income (X)									
	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
S, DC, JT — Examples: S — ABC Corporation Stock			X							
George Wash. Credit Union Accounts					X					
182 Main Street, Dover, Delaware				X						
JT 449 S. Virginia Ave. Pasadena, CA 91107							X			
S Navy Fed. Credit Union, Wash. DC				X						
S Bank of America Monterey Park, CA			X							
JT Golden 1 Credit Union Sacramento, CA		X								

For additional assets and unearned income, use next page

Reporting Individual's Name
Lucille Roybal-Allard

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	New Member---Not Reportable											

Schedule IV

Reporting Individual's Name: Lucille Roybal-Allard

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	J.I. Kislak Mortgage Corp., Miami FL	Mortgage on 449 S. Virginia Pasadena, CA				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
New Member---Not Reportable		

Use additional sheets if more space is required.

Reporting Individual's Name

Lucille Roybal-Allard

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
New Member---Not Reportable							

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(5)

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OFFICE OF MEMBERS & FINANCIAL DISCLOSURE
1993 MAY 17 PM 12:41
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(Office Use Only)

EDWARD RANDALL ROYCE
(Full Name)

1404 Longworth House Office Building — (202) 225-4111
(Mailing Address) — Daytime Telephone

Washington, D. C. 20515-0539

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 39th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978 as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Edward Randall Royce

DATE (Month, Day, Year) May 14, 1993

Reporting Individual's Name
EDWARD RANDALL ROYCE

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of California	Salary (Includes per diem)	$74,384.00
	Procter & Gamble Corporation	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
EDWARD RANDALL ROYCE

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT — Examples: S — ABC Corporation Stock				X								X									X							X
Examples: George Wash. Credit Union Accounts					X									X									X					
Examples: 182 Main Street, Dover, Delaware						X							X									X						
JT — 1254 North Lighthouse Lane, Anaheim California 92801								X					X											X				
JT — E.D.G.E. Coffee, Inc., dba Gloria Jean's Coffee Bean Franchise, 111 Rancho Conejo Boulevard, Suite 503, Newbury Park, CA						X									X									X				

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name

EDWARD RANDALL ROYCE

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Procter & Gamble Corporation Common Stock		X		7.13.92 9.03.92	X						

Schedule IV

Reporting Individual's Name
EDWARD RANDALL ROYCE

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	National Bank of California	Loan to E.D.G.E. Coffee, Inc., dba Gloria Jean's Coffee Bean Franchise				X			
JT	First Commercial Mortgage Company, Arkansas	First mortgage on property - 1254 North Lighthouse Lane, Anaheim, CA				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17 ... 51

U.S. HOUSE OF REPRESENTATIVES

(2)

HAND DELIVERED
(Office Use Only)

BOBBY L. RUSH
(Full Name)

3534 South Calumet Avenue
(Mailing Address)

202-225-4372
Daytime Telephone

Chicago, Illinois 60653

Filer Status	[X] Member of the U.S. House of Representatives	State: IL District: 1st	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978 as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Bobby L. Rush

DATE (Month, Day, Year): 5-17-93

3408

Reporting Individual's Name

BOBBY L. RUSH

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	City of Chicago, IL	Salary	$55,000
	Democratic National Committee	Salary	$30,000
	City of Chicago, IL	Spouse's Salary	$30,000

For payments to charity in lieu of honoraria, use Schedule II

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

MAY 14 7:11:09

Martin Olav Sabo
(Full Name)

U.S. House of Representatives — 202/225-4755
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: MN District: 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MC (9)

HAND DELIVERED
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependant child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Martin Olav Sabo	5-13-93

3410

Reporting Individual's Name
Martin Olav Sabo

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Lights Fantastic, Inc. 6825 Tenyson Drive, McLean, Virginia	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Martin Olav Sabo

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Brookings Institution, Washington, D.C.	speech	Feb. 20, 1992	$400
	Brookings Institution, Washington, D.C.	speech	June 6, 1992	$400

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
Martin Olav Sabo

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT Examples. B	ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X								
	State of MN Retirement Plan for 18 years vested in State Legislature			X										X						N/A										
	Lutheran Brotherhood (IRA)			X										X						N/A										
S	Dean Witter (IRA)				X									X						N/A										
	Farm Land (316 acres) Clinton Township N.D.					X					Life estate of mother, Klara Sabo. I receive no income																			
	Farm Land (237 acres) Clinton Township N.D.				X							X	X									X								
	Government Investors			X										X							X									

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Martin Olav Sabo

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Congressional Federal Credit Union				X									X							X								
	IDS Mutual Fund			X								X			X					X									
S	Pacific Southwest (Closed Account)			X										X							X								
S	Northern States Power (stock)			X								X									X								
S	International Savings				X									X								X							
S	First Virginia			X										X						X									
S	Richfield Bank			X										X					X										opened
S	Keystone Tax Free Fund			X										X						X									opened

Schedule III – Continuation

Reporting Individual's Name: Martin Olav Sabo

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

B, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Keystone Tax Free Fund	X			11-5-92	X						

Reporting Individual's Name
Martin Olav Sabo

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

Sec.	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Martin Olav Sabo

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.–Chicago–Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.–Los Angeles–Cleveland	Y	Y	Spouse	4 Days
	American Medical Assoc. Congressional Seminar (health care)	Feb. 27-March 1	Wash.,DC-West Palm Beach, Fl. - Wash. DC	Y	Y	spouse	N
	Electronic Industries Assoc. * Legislative Affairs Council Roundtable	April 13-20	Wash.,DC - Ft. Meyers, Fl. - Minneapolis, MN - Wash. DC	Y	Y	spouse	4 days
	Congressional Charity Golf Tournament White Sulphus Springs, West VA	Nov. 6-8	Provided own travel	Y	Y	spouse	N
	*3 days of food and loding was provided for this event. The four days in MPLS was at my expense.						

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Reporting Individual's Name

Martin Olav Sabo

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 28.

Date	Parties To	Terms of Agreement

GPO 1988 88-634A (#4)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 AM 10:42

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HAND DELIVERED
(Office Use Only)

3419

Bernard Sanders
(Full Name)

72 Killarney Drive — 202-225-4115
(Mailing Address) — Daytime Telephone

Burlington, Vermont 05401

Filer Status	[X] Member of the U.S. House of Representatives — State Vermont, District At-large	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month, Day, Year): 4/29/93

Reporting Individual's Name

Bernard Sanders

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Don Hooper for Secretary of State Campaign (VT)	Media Consultant Fee (Spouse)	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Bernard Sanders

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Goddard College, Plainfield, Vermont	Speech	Dec. 19, 1992	$50.00

This page may be copied if more space is required.

Reporting Individual's Name: Bernard Sanders

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Chittenden Bank of Burlington, Vt.	Personal Loan, Master Card, Education Loans		X					
	Wright Patman Federal Credit Union, DC	Visa, Personal Loans		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Bernard Sanders

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time (not) at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Society for General Internal Medicine. Cambridge,Ma.	1/7/92 1/7/92	Burlington, VT-Boston, MA, Boston-Burlington	N	Y	None	N
	New England Political Science Assn. Providence, R.I.	4/3/92 4/3/92	Burlington, VT-Providence, RI,Providence-Burlington	N	N	None	N
	Socialist Scholars Conference, New York, N.Y.	4/24/92 4/24/93	Burlington, VT-New York City, New York-Burlington	N	Y	None	N
	American Assn. Central Cancer Registries, Miami,FL	4/27/92 4/28/92	Burlington, VT-Miami, FL, Miami-Washington, D.C.	Y	N	None	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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1993 MAY -5 PM 2:06
OFFICE OF PUBLIC RECORDS
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED (8)
MC (Office Use Only)

George Edward Sangmeister
(Full Name)

Rt. 4, Box 87 Mokena, IL 60448 (202) 225-3635
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: Illinois, District: 11th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report, may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL George E. Sangmeister **DATE (Month, Day, Year)** May 5, 1993

3424

Reporting Individual's Name
George Edward Sangmeister

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of Illinois	Legislative Pension	$28,316

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

George Edward Sangmeister

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. The column is optional.			None	A Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX Over $1,000,000	Transaction (X)
S, DC, JT	Examples	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	Simmons Enterprise - Loan Contract					X									X									X						X
	Harris-Frankfort State Bank - Savings						X								X									X						
	Mokena State Bank - Savings				X										X							X								
	Chesterfield S & L - Savings				X										X							X								
	New Lenox State Bank - Savings						X								X									X						
	Martin Marietta Stock				X								X								X									

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: George Edward Sangmeister

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	IBM Stock			X								X								X									
	3 Lots - Village of Frankfort (2/3 interest)						X						X										X						
	Glenwood Building, 2455 Glenwood, Joliet, IL (14I)					X							X										X						X
	Building 26-28 Kansas Street, Frankfort, IL (1/12th int.)				X								X							X									
	First Midwest Bank - Keough Plan							X				X		X	X										X				
	Village of Frankfort, IL - 1½ acres of Bowen Street				X								X						X										
	American National Bank			X										X						X									

Reporting Individual's Name

George Edward Sangmeister

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Simmons Enterprise - Loan Contract		x		9/24/92		x					
	Glenwood Building, 2455 Glenwood., Joliet, IL (14% int.)		x		11/15/92			x				

Schedule IV

Reporting Individual's Name
George Edward Sangmeister

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any *time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Harris-Frankfort State Bank	Mortgage on 3 lots - Frankfort, IL			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

George Edward Sangmeister

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Florida Health Care Info. Council	Feb.20-21	Wash.,D.C.-Tallahassee-Chi	Y	Y	None	N
	American Medical Association	Feb. 27-Mar 1	Wash., D.C. - West Palm Beach - Chicago	Y	Y	Spouse	N

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Reporting Individual's Name

George Edward Sangmeister

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board Member	Joliet/Will County Center for Economic Development
Board Member	Silver Cross Hospital Foundation
Board Member	Will County Emergency Housing Development Corporation

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26

Date	Parties To	Terms of Agreement

GPO: 1982 50-535A (#6)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 AM 11: 18

Congressman Rick Santorum
(Full Name)

1222 Longworth HOB
(Mailing Address)

Washington, DC 20515

Daytime Telephone: 202-225-2135

Filer Status	[x] Member of the U.S. House of Representatives — State: PA District: 18	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

6

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(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [x]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [x]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [x]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [x]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "accepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [x]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Rick Santorum	May 12, 1993

Reporting Individual's Name
Rick Santorum

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples.	B	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
	603 Beaver Terr, St College, PA							X						X											X				
	306 Beaver Playce, St College, PA							X						X											X				
	Legg Mason Cash Reserve Trust IRA					X									X							X							
	Paine Webber Atlas Global Growth IRA					X										X						X							
	American Funds Group Washington Mutual Fund					X							X									X							X
	American Funds Group Investment Co. of America					X							X								X								X

For additional assets and unearned income, use next page

Reporting Individual's Name: Rick Santorum

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	American Funds Group: Washington Mutual Fund	x			4/20/92	x						
	American Funds Group: Investment Co. of America	x			4/28/92	x						

Reporting Individual's Name
Rick Santorum

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	U.S. Bank, Johnstown, PA	Mortgage on 603 Beaver Terr, St College, PA		x					
	Integra Bank, Pittsburgh, PA (formerly named Landmark Savings)	Mortgage on 306 Beaver Playce St College, PA		x					
	Student Loan Servicing Center (Salt Lake)	Student Loan		x					
	Student Loan Servicing Center (Harrisburg)	Student Loan	x						

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Planer (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Rick Santorum

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American-Israel Educ Fndtn	Jan 7-14	WDC - Tel Aviv - WDC	Y	Y	None	N
	Multi-Media Entertainment to tape Donahue show	Mar 26	WDC - New York City - & Newark - Pitts	N	N	None	N

This page may be copied if more space is required.

Reporting Individual's Name

Rick Santorum

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board Member	Mt. Lebanon Extended Day Program
Board Member	Friends of St. Mary's in Munhall

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 58-636A (im)

3438

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(7)

RECEIVED
1993 MAY 17 PM 1:48
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
MC
(Office Use Only)

WILLIAM CLARENCE SARPALIUS
(Full Name)

126 CANNON HOUSE BULDING
(Mailing Address)

WASHINGTON, D.C. 20515

Daytime Telephone: (202) 225-3706

Filer Status	[X] Member of the U.S. House of Representatives	State: Texas District: 13th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: William Clarence Sarpalius

DATE (Month, Day, Year): MAY 15, 1993

Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						BLOCK C Income: Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	Transaction (X)
S, DC, JT	Examples.	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
	907 S. Alabama, Amarillo, Texas					X								X									X						X
	Ball Cnty Tx Health Face Dev Corp Revenue Bonds				X								X								X								
	Texas Municipal Power Agency Refunding Revenue Bonds				X								X								X								
	Richardson Tx Independent School District Bonds				X								X							X									
	Greater Orlando, Fl Aviation Authority Airport Facs Revenue Bonds				X								X								X								
	Hilliard Ohio Consolidated School District General Obligation Bonds				X								X								X								

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: WILLIAM CLARENCE SARPALIUS

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Monroe Cnty, Georgia Dev Auth Pollution Ctl Revenue Bonds			X								X									X								
Washington Public Power Supply System Nuclear Project #2 Revenue Bonds			X								X									X								
Lower Colorado River Authority Texas Revenue Bonds			X								X									X								
Indiana St Employment Dev Commn Environmental Rev Bonds			X								X									X								
Butler Ohio Revenue Bonds 7.0% 1-1-96			X								X									X								X
Austin, Tx Utility System Revenue Bonds 7.75% 11-15-12			X								X									X								X
Marquette, MI Revenue Bonds 7.5% 4-1-07			X								X									X								X
District of Columbia Gen. Obligation -Refunding Series A-FGIC Insured			X								X									X								X
Harris County Revenue Bonds 0.0% 8-1-12			X								X									X								X
Texas State Retirement Program (Value Unknown)																												
Time Capsules, Inc. (Formed Feb. 1992)				X														X										

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Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	907 S. Alabama, Amarillo, Texas	X			2-8-92		X					
	Butler Ohio Revenue Bonds 7.0% 1-1-96	X			1-8-92	X						
	Austin, Tx Utility System Revenue Bonds 7.75% 11-15-12	X			1-12-92	X						
	Marquette, MI Revenue Bonds 7.5% 4-1-07	X			1-14-92	X						
	District of Columbia Gen. Obligation -Refunding Series A-FGIC insured	X			1-14-92	X						
	Harris County Revenue Bonds 0.0% 8-1-12	X			1-20-92	X						

Reporting Individual's Name

WILLIAM CLARENCE SARPALIUS

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Amarillo National Bank, Amarillo, Texas	Loan (Personal)		X					
	Wright Patman Cong'l Fed. Credit Union, Wash.DC	Loan (Personal)		X					
	MBNA America	Revolving Credit Card	X						
	Roy E. Wiedenkofer, Arnett, OK	Mortgage on 907 S. Alabama, Amarillo		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

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Reporting Individual's Name
WILLIAM CLARENCE SARPALIUS

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Livestock Marketing Assn.	Feb. 20-25	Wash.DC-DFW-Amarillo-DFW-Maui; Maui-DFW-Wash.DC	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
WILLIAM CLARENCE SARPALIUS

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President (Unpaid)	Time Capsules, Inc. (Virginia)

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1988 O-236A (PN)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 17 PM 2:12

U.S. HOUSE OF REPRESENTATIVES

(1)

THOMAS C. SAWYER
(Full Name)

1298 N. HOWARD ST. (216) 923-7699
(Mailing Address) Daytime Telephone

AKRON, OHIO 44310

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio District: 14	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

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(Office Use Only)

3445

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [✓]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [✓]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [✓]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [✓]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [✓]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [✓]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [✓]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [✓]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [✓]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Tom Sawyer	DATE (Month, Day, Year): 5/12/93

Reporting Individual's Name
SNYDER, THOMAS C.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Copley-Fairlawn City Schools	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3446

Reporting Individual's Name
SAWYER, THOMAS C

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
THE COUNCIL FOR ADVANCEMENT AND SUPPORT OF EDUCATION WASH, D.C.	Speech	Feb. 4, 1992	$500.
University of Miami School of Law	Speech	Feb. 7-8, 1992	$500.

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
SAWYER, THOMAS C.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
B, DC, JT	Examples:	B	ABC Corporation Stock			X								X									X									X
			George Wash. Credit Union Accounts				X									X									X							
			182 Main Street, Dover, Delaware					X							X									X								
JT	Summit Federal Credit Union					X										X							X									
DC	Summit Federal Credit Union					X										X							X									
S	State Teachers Retirement System of Ohio						X							X							X											
Self	State Teachers Ret. System of Ohio				X									X							X											
Self	State Employee Ret. Syst				X									X							X											

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: SAWYER, THOMAS C.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Self	Public Employees Retirement Opt				X							X							X										
S	Lincoln National Managed Fund - Annuity					X												Mutual Fund	X										

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Reporting Individual's Name
SAWYER, THOMAS C.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be seperately reponed under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	University of Miami Law School Coral Gables, Florida	Feb. 7-8, 1992	Cleveland – Coral Gables – Cleveland (incl airfare and ground transp)	Y	Y	None	None
	National Asso. for Public Opinion Research, St. Petersburg, Fla	May 17-18 1992	Cleve – St Petersburg – Cleve (incl. airfare and ground trans)	Y	Y	None	None
	Literacy Assistance Center, New York City	Aug. 2-3 1992	Cleve – N.Y. – Wash (incl. airfare and gd transp)	Y	Y	None	None
	Council of Chemical Research, Cleve	Oct. 4, 1992	Wash – Cleve – Wash (incl. airfare and gd transp)	N	N	None	None
	U.S.-Japan Economic Agenda (Japan)	Nov. 11-14, 1992	Cleve – Japan – Cleve (incl airfare and ground transp)	Y	Y	None	None
	National Conference of State Legislatures	July 26 1992	Cleve – Pittsb – Cleve (airfare & gnd transp)	N	N	None	None

This page may be copied if more space is required.

Schedule VII

Reporting Individual's Name
SAWYER, THOMAS C.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	National Invention Center, Inc.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 25.

Date	Parties To	Terms of Agreement

GPO: 1992 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 AM 10:46
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(4)

Hugh James Saxton
(Full Name)

207 High Street
(Mailing Address)

Daytime Telephone: 202-225-4765 or 609-261-5800

Mount Holly, New Jersey 08060

Filer Status	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

HAND DELIVERED
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	[ ]	[X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	[ ]	[X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	[ ]	[X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	[X]	[ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	[ ]	[X]
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	[ ]	[X]
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	[ ]	[X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	[ ]	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Hugh James Saxton	May 14, 1993

3452

Reporting Individual's Name

Hugh James Saxton

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts					X								X									X							
	182 Main Street, Dover, Delaware						X						X									X								
JT	911 Route 206, Bordentown, N.J.							X					X											X						
S	Bank of Mid-Jersey, Bordentown, N.J.		X									X								X										
S	Mount Holly State Bank, Mt. Holly, NJ						X							X								X								
JT	Bank of Mid-Jersey (IRA) Bordentown, N.J.			X										X							X									
S	First American, Reston, VA		X											X						X										

For additional assets and unearned income, use next page

Reporting Individual's Name: Hugh James Saxton

SCHEDULE IV — TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				
S	207 High Street, Mount Holly, New Jersey 08060	X			8-28-92				X			

Schedule IV

Reporting Individual's Name

.Hugh James Saxton

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Bank of Mid-Jersey, Bordentown, N.J.	Mortgage on 911 Rt. 206, Bordentown N.J.		X					
S	Bank of Mid-Jersey, Bordentown, N.J.	Mortgage on 207 High St., Mt. Holly N.J.			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

DANIEL L. SCHAEFER (DAN SCHAEFER)
(Full Name)

10755 WEST ILIFF AVENUE
(Mailing Address)

LAKEWOOD, CO 80227

Daytime Telephone: 303-779-5710

Filer Status	[X] Member of the U.S. House of Representatives	State: COLORADO District: 6TH DISTRICT	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

MC (7)

HAND DELIVERED

(Office Use Only)

3456

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Dan Schaefer

DATE (Month, Day, Year): 5/11/93

Reporting Individual's Name
DANIEL L SCHAEFER

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	JEFFERSON COUNTY PUBLIC SCHOOLS	SPOUSE SALARY	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

DANIEL L. SCHAEFER

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	TOBACCO INSTITUTE, LA QUINTA, CA	SPEECH	JAN 17-19, 1992	$2,000.00
	NATIONAL CABLE T.V. ASSOCIATION, DALLAS, TX	SPEECH	MAY 2-4, 1992	$1,500.00

This page may be copied if more space is required.

Reporting Individual's Name

DANIEL L SCHAEFER

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock				X								X									X									X
George Wash. Credit Union Accounts					X									X									X							
182 Main Street, Dover, Delaware						X							X									X								
S	PUBLIC EMPLOYEES RETIREMENT ASSOS.				X									X						X										
SELF	INVESTOR PARTNERSHIP GROUP UNDEVELOPED LAND, COLORADO				X														X											
SELF	ADAMS INVESTORS GROUP UNDEVELOPED LAND, COLORADO		X																X											
JT	INVESTMENT PROPERTY, LOT 304 (1/4 - INTEREST) WILSON HILL, MASSENA, NY 13662			X															X											

For additional assets and unearned income, use next page

Reporting Individual's Name

DANIEL L. SCHAEFER

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
SELF	NATIONS BANK, VA	VA TOWNHOUSE MORTGAGE (1/4 OWNER)		X					
JT	COLORADO NATIONAL BANK - LAKEWOOD, CO	PERSONAL LOAN	X						
JT	1ST NATIONAL BANK WESTLAND, LAKEWOOD, CO	BUSINESS & PERSONAL LOAN			X				
JT	COLEMAN GUYMAN, MASSENA, NY	1/4 INTEREST-INVESTMENT PROPERTY		X					
DC	CO STUDENT OBLIGATION BOND AUTHORITY	STUDENT LOAN	X						

SCHEDULE VI—GIFTS N/A

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (salver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
DANIEL L SCHAEFER

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6–13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	ELECTRONIC INDUSTRIES ASSOCIATION	JAN 10-12	DENVER-LAS VEGAS-DENVER	Y	Y	NONE	N
	HUNTER INDUSTRIAL SITE TOUR	JAN 13-15	DENVER-HOUSTON-DENVER	Y	Y	NONE	N
	TOBACACCO INSTITUTE	JAN 17-19	DENVER-PALM SPRINGS-DENVER	Y	Y	SPOUSE	N
	ENERGY & COMMERCE HEALTH FIELD HEARING	FEB 27-28	WASHINGTON-DETROIT-DENVER	Y	Y	NONE	N
	GOVERNOR SULLIVAN-WYOMING COASTAL MTBE PLANT	MAR 13-15	DULLES-WYOMING-DULLES	Y	Y	NONE	N
	NATIONAL ASSOCIATION OF BROADCASTERS	APR 11-13	DULLES-LASVEGAS-DENVER	Y	Y	NONE	N
	NATIONAL CABLE TV ASSOCIATION	MAY 2-4	DENVER-FT WORTH-DULLES DENVER-FT WORTH-DENVER	Y	Y	SPOUSE	N
	NCTA/SMALL CABLE T.V. OPERATIONS	NOV 5-7	DENVER-WYOMING-DENVER	Y	Y	NONE	N

This page may be copied if more space is required.

Reporting Individual's Name
DANIEL L SCHAEFER

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
PARTNER	INVESTORS PARTNERSHIP GROUP
PARTNER	ADAMS INVESTMENT GROUP

SCHEDULE IX – AGREEMENTS

N/A

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

N/A

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

3462

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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MC (Office Use Only)

LYNN A. SCHENK
(Full Name)

315 CANNON HOUSE OFFICE Bldg.
(Mailing Address)

(202) 225-2040
Daytime Telephone

WASHINGTON DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 49th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978 as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file the report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Lynn A. Schenk	April 29, 1993

3463

Reporting Individual's Name
LYNN A. SCHENK

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	LORENZ, ALHADEFF + OGGEL, SAN DIEGO	FEES AS ATTORNEY/CONSULTANT	$91,000
	LONG BEACH BANK, LONG BEACH	DIRECTOR'S FEES	$39,000
	UNIVERSITY of SAN DIEGO SCHOOL of LAW	SPOUSE SALARY LAW PROFESSOR	N/A
	ATTORNEY/CONSULTANT, SAN DIEGO	SPOUSE SELF-EMPLOYED PROFESSIONAL FEES	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name: LYNN A. SCHENK

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)									BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X								X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X								X							
			832 AVALON CT, SAN DIEGO						X					X											X				
			820 AVALON CT., SAN DIEGO						X					X											X				
			10 ACRES RAW LAND, SAN BERNADINO COUNTY			X													NONE		X								
			1419 CARDIFF, LOS ANGELES							X				X											X				
			MEDI. MALL, INC. STOCK, NEV.							X						X											X		
			PUTNAM GROWTH + INCOME FUND				X						X			X							X						

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: LYNN A. SCHENK

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
IDS STOCK FUND			X									X			X						X								
MANHATTAN FUND			X									X			X						X								
DREYFUS CAL. TAX FREE					X							X											X						
INTEL CORPORATION			X									X								X									
IBM			X									X								X									
PRICE COMPANY, CALIF.			X									X							X										
AGOURON PHARMACEUTICALS			X									X							X										
CITIZENS UTILITIES, DEL.			X									X								X									
CALIF. STATE GEN. OBLIG. BOND			X											X					X										
PRUDENTIAL GOVT. SEC. TR. M.M.			X									X								X									
SEQUOYAH 7 LTD. PART.				X								X									X								
FOGELMAN MEMPHIS LTD. PROPERTIES PART.				X								X									X								
PRUDENTIAL EQUITY FUND				X											X						X								
PUTNAM. FED. INCOME TR. FND			X									X									X								
FRANKLIN U.S. GOVT. SEC. FND			X									X								X									

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: LYNN A. SCHENK

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																			BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000		
HUNTINGTON FUNDS - GLOBAL CAP				X							X									X									
U.S. TREASURIES (CATS)					X								X					X											
FHLMC				X									X							X									
U.S. TREASURIES (STRIP)					X													X											
ZWEIG STRATEGY FND (B")			X								X			X				X											
AT+T			X								X								X										
NORTHWESTERN NAT'L LIFE (Company)			X								X								X										
SOUTHWESTERN BELL STOCK			X								X								X										
U.S. WEST STOCK			X								X								X										
FRANKLIN CAL. TAX FREE FND.				X							X										X								
GAMEMAKERS LTD. PART.			X															X											
S U.S. TREASURIES (CATS)							X											X											
S U.S. TREASURIES (STRIP)						X												X											
S PRUD. GOVT SEC. TR. M.M. FND.			X								X									X									
S FRANKLIN Adj. RATE U.S. GOVT				X							X			X							X								

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

LYNN A. SCHENK

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX over $100,000	BLOCK D Transaction (X)
S	GNMA & FHLMA					X							X									X					
S	PRUDENTIAL EQUITY FND ("B")				X						X										X						
S	ZWEIG STRATEGY FND ("B")			X							X			X						X							
	UNION BANK SAN DIEGO M.M.				X								X								X						
	UNION BANK SAN DIEGO (CHKING)					X							X							X							
	LONG BEACH BANK C.D.	X											X							X							CLOSED
	LONG BEACH BANK SAV.	X											X								X						CLOSED
	UNION BANK SAN DIEGO M.M.					X							X								X						
	UNION BANK SAN DIEGO (CHKING)				X								X							X							
	WELLS FARGO SAN DIEGO C.D.					X							X									X					
	BANK OF AMERICA SAN DIEGO C.D.						X						X									X					
	BANK OF CALIF SAN DIEGO (CHKING)				X								X					X									
S	TIAA/CREF RETIREMENT BENEFIT						X				X		X				N/A										

Reporting Individual's Name: LYNN A. SCHENK

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	ZWEIG STRATEGY FUND	X			6/15/92		X					
	MEDI-MAILS, INC. NEV. COMMON STOCK		X		4 Times Bet. 1/1 + 9/1				X			
	U.S. TREASURIES (CATS AND STRIPS)	X			5/5/92		X					
	GNMA / FNMA	X			5/5/92		X					

Reporting Individual's Name: LYNN A. SCHENK

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

SP, DP, JT	Creditor	Type of Liability	Category of Amount of Value (X) B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
S	GLENDALE FEDERAL BANK	TRUST DEED on 820 AVALON SAN DIEGO		X					
S	J.H.E. LARGENT, SAN DIEGO	" " " "	X						
S	PRINCIPAL MUTUAL LIFE IN. DES MOINES	TRUST DEED on 832 AVALON SAN DIEGO	X						
JT	HOME SAL, LOS ANGELES	TRUST DEED on 1419 CARDIFF Los Angeles			X				

SCHEDULE VI – GIFTS

N/A

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
LYNN A. SCHENK

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
MEMBER BOARD OF FELLOWS	CLAREMONT GRADUATE SCHOOL AND UNIVERSITY CENTER (Non Profit)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 28.

Date	Parties To	Terms of Agreement
12/31/92	LORENZ, ALHADEFF + OPSEL	BUY-OUT OF VESTED ACCOUNTS RECEIVABLE from Prior Prof. SERVICES

GPO: 1989 89-686A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(19)

1993 MAY 14 AM 10:25

MC

HAND DELIVERED
(Office Use Only)

Steven Harvey Schiff
(Full Name)

804 Summit Avenue NE, Albuquerque, NM 87106 (202) 225-6316
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: NM District: 01	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[signature]	5/12/93

3472

Reporting Individual's Name

Steven H. Schiff

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Ethicon Inc., Albuquerque, NM	Spouse Salary	n/a
	U.S. Army Reserve	Spouse Salary	n/a
	(See attached 1040 for specific details).		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name: Steven H. Schiff

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
JT	Real Estate Contract - Coal Av					X									X	X						X								
JT	First Interstate Bank/Savings						X								X								X							
JT	Sunwest Bank/Savings					X									X					X										
JT	General Electric/Savings Trust					X							X							X										

Form 1040 — Department of the Treasury—Internal Revenue Service — U.S. Individual Income Tax Return (T) — 1992

IRS Use Only—Do not write or staple in this space

For the year Jan. 1–Dec. 31, 1992, or other tax year beginning , 1992, ending , 19 — OMB No 1545-0074

Label (Use the IRS label. Otherwise, please print or type)

STEVEN H SCHIFF
MARCIA S SCHIFF
804 SUMMIT NE
ALBUQUERQUE, NM 87106

Your social security number: 360-40-7830
Spouse's social security number: 331-42-7371
For Privacy Act and Paperwork Reduction Act Notice, see page 4.

Presidential Election Campaign
Do you want $1 to go to this fund? [X] Yes [ ] No
If a joint return, does your spouse want $1 to go to this fund? [X] Yes [ ] No
Note: Checking "Yes" will not change your tax or reduce your refund.

Filing Status (See page 10) — Check only one box.
1 [ ] Single
2 [X] Married filing joint return (even if only one had income)
3 [ ] Married filing separate return. Enter spouse's social security no. above and full name here ▶
4 [ ] Head of household (with qualifying person) (See page 11.) If the qualifying person is a child but not your dependent, enter this child's name here ▶
5 [ ] Qualifying widow(er) with dependent child (year spouse died ▶ 19). (See page 11.)

Exemptions (See page 11)
6a [X] Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2
b [X] Spouse

No. of boxes checked on 6a and 6b: 2

c Dependents: (1) Name (first, initial, and last name)	(2) Check if under age 1	(3) If age 1 or older, dependent's social security number	(4) Dependent's relationship to you	(5) No. of mos. lived in your home in 1992
JAIMI		585-98-8709	CHILD	12
DANIEL		525-41-3707	CHILD	12

If more than six dependents see page 12

No. of your children on 6c who:
- lived with you: 2
- didn't live with you due to divorce or separation (see page 13):
No. of other dependents on 6c:

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ▶ [ ]
e Total number of exemptions claimed: Add numbers entered on lines above ▶ 4

Income — Attach Copy B of your Forms W-2, W-2G, and 1099-R here. If you did not get a W-2, see page 8. Attach check or money order on top of any Forms W-2, W-2G, or 1099-R.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	155,506
8a	Taxable interest income. Attach Schedule B if over $400	8a	2,589
b	Tax-exempt interest income (see page 15). DON'T include on line 8a: 8b		
9	Dividend income. Attach Schedule B if over $400	9	52
10	Taxable refunds, credits, or offsets of state and local income taxes from worksheet on page 16	10	
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	
13	Capital gain or (loss). Attach Schedule D	13	311
14	Capital gain distributions not reported on line 13 (see page 15)	14	
15	Other gains or (losses). Attach Form 4797	15	
16a	Total IRA distributions: 16a — b Taxable amount	16b	
17a	Total pensions and annuities: 17a — b Taxable amount	17b	
18	Rents, royalties, partnerships, estates, trusts, etc. Attach Schedule E	18	
19	Farm income or (loss). Attach Schedule F	19	
20	Unemployment compensation (see page 17)	20	
21a	Social security benefits: 21a — b Taxable amount	21b	
22	Other income. List type and amount—see page 18	22	
23	Add the amounts in the far right column for lines 7 through 22. This is your **total income** ▶	23	158,458

Adjustments to Income (See page 18)

24a	Your IRA deduction from applicable worksheet on page 18 or 20	24a	
b	Spouse's IRA deduction from applicable worksheet on page 18 or 20	24b	
25	One-half of self-employment tax (see page 20)	25	
26	Self-employed health insurance deduction (see page 20)	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid. Recipient's SSN ▶	29	
30	Add lines 24a through 29 ▶	30	

Adjusted Gross Income

31	Subtract line 30 from line 23. This is your **adjusted gross income**. If this amount is less than $22,370 and a child lived with you, see page EIC-1 to find out if you can claim the "Earned Income Credit" on line 56 ▶	31	158,458

Form 1040 (1992) Page 2

STEVEN M & MARCIA S SCHIFF 360-40-7830

Tax Computation (See page 22)	32 Amount from line 31 (adjusted gross income)	32	158,458
	33a Check if ☐ You were 65 or older, ☐ Blind, ☐ Spouse was 65 or older, ☐ Blind. Add the number of boxes checked above and enter the total here ▶ 33a ☐		
	b If your parent (or someone else) can claim you as a dependent, check here ▶ 33b ☐		
	c If you are married filing separately and your spouse itemizes deductions or you are a dual-status alien, see page 22 and check here ▶ 33c ☐		
	34 Enter the larger of your: Itemized deductions from Schedule A, line 28, OR Standard deduction shown below for your filing status. But if you checked any box on line 33a or b, go to page 22 to find your standard deduction. If you checked box 33c, your standard deduction is zero. • Single—$3,600 • Head of household—$5,250 • Married filing jointly or Qualifying widow(er)—$6,000 • Married filing separately—$3,000	34	21,695
	35 Subtract line 34 from line 32	35	136,763
	36 If line 32 is $78,950 or less, multiply $2,300 by the total number of exemptions claimed on line 6e. If line 32 is over $78,950, see the worksheet on page 23 for the amount to enter	36	9,016
If you want the IRS to figure your tax, see page 23	37 Taxable income. Subtract line 36 from line 35. If line 36 is more than line 35, enter -0-	37	127,747
	38 Enter tax. Check if from a ☐ Tax Table, b ☐ Tax Rate Schedules, c ☒ Schedule D, or d ☐ Form 8615 (see page 23). Amount, if any, from Form(s) 8814 ▶ a	38	32,343
	39 Additional taxes (see page 23). Check if from a ☐ Form 4970 b ☐ Form 4972	39	
	40 Add lines 38 and 39 ▶	40	32,343
Credits (See page 23)	41 Credit for child and dependent care expenses. Attach Form 2441 — 41: 480		
	42 Credit for the elderly or the disabled. Attach Schedule R — 42		
	43 Foreign tax credit. Attach Form 1116 — 43		
	44 Other credits (see page 24). Check if from a ☐ Form 3800 b ☐ Form 8396 c ☐ Form 8801 d ☐ Form (specify) — 44		
	45 Add lines 41 through 44	45	480
	46 Subtract line 45 from line 40 ▶	46	31,863
Other Taxes	47 Self-employment tax. Attach Schedule SE. Also, see line 25	47	
	48 Alternative minimum tax. Attach Form 6251	48	
	49 Recapture taxes (see page 26). Check if from a ☐ Form 4255 b ☐ Form 8611 c ☐ Form 8828	49	
	50 Social security and Medicare tax on tip inc not reported to employer. Attach Form 4137	50	
	51 Tax on qualified retirement plans, including IRAs. Attach Form 5329	51	
	52 Advance earned income credit payments from Form W-2	52	
	53 Add lines 46 through 52. Total tax ▶	53	31,863
Payments Attach Forms W-2, W-2G, and 1099-R on the front	54 Federal income tax withheld. If any is from Form(s) 1099, check ▶ ☐ — 54: 34,056		
	55 1992 estimated tax payments and amount applied from 1991 return — 55		
	56 Earned income credit. Attach Schedule EIC — 56		
	57 Amount paid with Form 4868 (extension request) — 57		
	58 Excess social security, Medicare, and RRTA tax withheld (see page 28) — 58		
	59 Other payments (see page 28). Check if from a ☐ Form 2439 b ☐ Form 4136 — 59		
	60 Add lines 54 through 59. Total payments. ▶	60	34,056
Refund or Amount You Owe Attach check or money order on top of Form(s) W-2, etc., on the front	61 If line 60 is more than line 53, subtract line 53 from line 60. This is the amount you OVERPAID ▶	61	2,193
	62 Amount of line 61 you want REFUNDED TO YOU ▶	62	2,193
	63 Amount of line 61 you want APPLIED TO YOUR 1993 ESTIMATED TAX ▶ 63		
	64 If line 53 is more than line 60, subtract line 60 from line 53. This is the AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1992 Form 1040" on it	64	
	65 Estimated tax penalty (see page 27). Also include on line 64 — 65		

Sign Here Keep a copy of this return for your records

Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Your signature ▶ Date Your occupation: USCONGRESSMAN

Spouse's signature. If a joint return, BOTH must sign. Date Spouse's occupation: CLERK

Paid Preparer's Use Only

Preparer's signature ▶ Date 3/16/93 Check if self-employed ☒ Preparer's social security no. 585-20-1799

Firm's name (or yours if self-employed) and address ▶ IVENER & DEMKOVICH CERTIFIED PUBLIC ACCOUNTANTS 3423 CENTRAL NE ALBUQUERQUE, NEW MEXICO 87106 E.I. No. 85-0322288

7363 3/12/93

SCHEDULES A&B (Form 1040)
Department of the Treasury Internal Revenue Service

Schedule A—Itemized Deductions

(Schedule B is on back)

▶ Attach to Form 1040. ▶ See instructions for Schedules A and B (Form 1040).

OMB No. 1545-0074

1992

Attachment Sequence No. 07

Name(s) shown on Form 1040: STEVEN H & MARCIA S SCHIFF

Your social security number: 360-40-7830

Medical and Dental Expenses		Caution: Do not include expenses reimbursed or paid by others			
	1	Medical and dental expenses (see page A-1)	1	1,080	
	2	Enter amount from Form 1040, line 32 . . . 2 158,458			
	3	Multiply line 2 above by 7.5% (.075)	3	11,884	
	4	Subtract line 3 from line 1. If zero or less, enter -0- ▶			4 0
Taxes You Paid (See page A-1.)	5	State and local income taxes	5	9,511	
	6	Real estate taxes (see page A-2)	6	935	
	7	Other taxes ▶	7	—	
	8	Add lines 5 through 7 ▶			8 10,446
Interest You Paid (See page A-2)	9a	Home mortgage interest and points reported to you on Form 1098 SEE ATTACHED	9a	430	
	b	Home mortgage interest not reported to you on Form 1098. If paid to an individual, show that person's name and address ▶	9b		
Note: Personal interest is not deductible	10	Points not reported to you on Form 1098. See page A-3 for special rules	10		
	11	Investment interest (See page A-3)	11		
	12	Add lines 9a through 11 ▶			12 430
Gifts to Charity (See page A-3)		Caution: If you made a charitable contribution and received a benefit in return, see page A-3			
	13	Contributions by cash or check	13	6,750	
	14	Other than cash or check. If over $500, you MUST attach Form 8283	14		
	15	Carryover from prior year	15		
	16	Add lines 13 through 15 ▶			16 6,750
Casualty and Theft Losses	17	Casualty or theft loss(es). Attach Form 4684. (See page A-4) ▶			17
Moving Expenses	18	Moving expenses. Attach Form 3903 or 3903F. (See page A-4) ▶			18
Job Expenses and Most Other Miscellaneous Deductions (See page A-5 for expenses to deduct here)	19	Unreimbursed employee expenses—job travel, union dues, job education, etc. If required, you MUST attach Form 2106. (See page A-4) ▶ EMPLOYEE BUS.EXP. 6,619 PROFESSIONAL DUES 875	19	7,494	
	20	Other expenses—invest. tax prep, safe deposit box, etc. List type and amt ▶ TAX RETURN FEE 290 NATIONAL GUARD UNIFORMS & CONV 1,050	20	1,340	
	21	Add lines 19 and 20	21	8,834	
	22	Enter amount from Form 1040, line 32 . . . 22 158,458			
	23	Multiply line 22 above by 2% (.02)	23	3,169	
	24	Subtract line 23 from line 21. If zero or less, enter -0- ▶			24 5,665
Other Miscellaneous Deductions	25	Other—from list on page A-5. List type and amount ▶			25
Total Itemized Deductions	26	Is the amount on Form 1040, line 32, more than $105,250 (more than $52,625 if married filing separately)? • NO. Your deduction is not limited. Add lines 4, 8, 12, 16, 17, 18, 24, and 25. • YES. Your deduction may be limited. See page A-5 for the amount to enter. ▶			26 21,695

Caution: Be sure to enter on Form 1040, line 34, the LARGER of the amount on line 26 above or your standard deduction.

Schedules A&B (Form 1040) 1992 — OMB No. 1545-0074 — Page 2

Name(s) shown on Form 1040 Do not enter name and social security number if shown on other side: STEVEN H & MARCIA S SCHIFF

Your social security number: 360-40-7830

Schedule B—Interest and Dividend Income

Attachment Sequence No. 08

Part I Interest Income (See pages 14 and B-1)

If you had over $400 in taxable interest income OR are claiming the exclusion of interest from series EE U S savings bonds issued after 1989, you must complete this part List ALL interest you received If you had over $400 in taxable interest income, you must also complete Part III If you received, as a nominee, interest that actually belongs to another person, or you received or paid accrued interest on securities transferred between interest payment dates, see page B-1

Note: If you received a Form 1099-INT, Form 1099-OID, or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total interest shown on that form

Interest Income		Amount
1 List name of payer—If any interest income is from seller-financed mortgages, see page B-1 and list the interest first ▶ CORNELIUS-REC	1	350
1ST INTERSTATE	1	1,260
ETHICON EMPL CU	1	63
PRUDENTIAL	1	79
STATE OF ISRAEL	1	14
SUNWEST BANK	1	40
CONGRESSIOAL FCU	1	37
GENERAL ELECTRIC	1	622
GENERAL ELECTRIC	1	124
2 Add the amounts on line 1	2	2,589
3 Excludable interest on series EE U S savings bonds issued after 1989 from Form 8815, line 14 You MUST attach Form 8815 to Form 1040	3	
4 Subtract line 3 from line 2 Enter the result here and on Form 1040, line 8a ▶	4	2,589

Part II Dividend Income (See pages 15 and B-1)

If you had over $400 in gross dividends and/or other distributions on stock, you must complete this part and Part III If you received, as a nominee, dividends that actually belong to another person, see page B-1

Note: If you received a Form 1099-DIV or substitute statement from a brokerage firm, list the firm's name as the payer and enter the total dividends shown on that form

Dividend Income		Amount
5 List name of payer—include on this line capital gain distributions, nontaxable distributions, etc ▶	5	
SECURITIES OWNER	5	38
JOHNSON & JOHNSON	5	14
6 Add the amounts on line 5	6	52
7 Capital gain distributions Enter here and on Schedule D*	7	
8 Nontaxable distributions (See the inst. for Form 1040, line 9)	8	
9 Add lines 7 and 8	9	
10 Subtract line 9 from line 6 Enter the result here and on Form 1040, line 9 ▶	10	52

*If you received capital gain distributions but do not need Schedule D to report any other gains or losses, see the instructions for Form 1040, lines 13 and 14

Part III Foreign Accounts and Foreign Trusts (See page B-2)

If you had over $400 of interest or dividends OR had a foreign account or were a grantor of, or a transferor to, a foreign trust, you must complete this part

	Yes	No
11a At any time during 1992, did you have an interest in or a signature or other authority over a financial account in a foreign country, such as a bank account, securities account, or other financial account? See page B-2 for exceptions and filing requirements for Form TD F 90-22 1		X
b If "Yes," enter the name of the foreign country ▶		
12 Were you the grantor of, or transferor to, a foreign trust that existed during 1992, whether or not you have any beneficial interest in it? If "Yes," you may have to file Form 3520, 3520-A, or 926		X

SCHEDULE D (Form 1040)

Department of the Treasury Internal Revenue Service

Capital Gains and Losses

(And Reconciliation of Forms 1099-B for Bartering Transactions)

▶ Attach to Form 1040. ▶ See instructions for Schedule D (Form 1040).

▶ For more space to list transactions for lines 1a and 9a, get Schedule D-1 (Form 1040).

OMB No. 1545-0074

1992

Attachment Sequence No. 12A

Name(s) shown on Form 1040: STEVEN H & MARCIA S SCHIFF

Your social security number: 360-40-7830

Caution: Add the following amounts reported to you for 1992 on Forms 1099-B and 1099-S (or on substitute statements): (a) proceeds from transactions involving stocks, bonds, and other securities, and (b) gross proceeds from real estate transactions not reported on another form or schedule. If the total does not equal the total of lines 1c and 9c, column (d), attach a statement explaining the difference.

Part I Short-Term Capital Gains and Losses—Assets Held One Year or Less

(a) Description of property (Example: 100 shares IBM preferred of "XYZ" Co.)	(b) Date acquired (Mo., day, yr.)	(c) Date sold (Mo., day, yr.)	(d) Sales price (see page D-2)	(e) Cost or other basis (see page D-2)	(f) LOSS If (e) is more than (d), subtract (d) from (e)	(g) GAIN If (d) is more than (e), subtract (e) from (d)
1a Stocks, Bonds, Other Securities, and Real Estate. Include Form 1099-B and 1099-S Transactions. See pages D-1 and D-3.						
1b Amounts from Schedule D-1, line 1b						
1c Total of All Sales Price Amounts. Add column (d) of lines 1a and 1b ▶ 1c						
1d Other Transactions						

2 Short-term gain from sale or exchange of your home from Form 2119, line 17 or 23	2	
3 Short-term gain from installment sales from Form 6252, line 26 or 37	3	
4 Short-term gain or (loss) from like-kind exchanges from Form 8824	4	
5 Net short-term gain or (loss) from partnerships, S corporations, and fiduciaries	5	
6 Short-term capital loss carryover from 1991 Schedule D, line 36	6	
7 Add lines 1a, 1b, 1d, and 2 through 6, in columns (f) and (g)	7	
8 Net short-term capital gain or (loss). Combine columns (f) and (g) of line 7	8	

Part II Long-Term Capital Gains and Losses—Assets Held More Than One Year

9a Stocks, Bonds, Other Securities, and Real Estate. Include Form 1099-B and 1099-S Transactions. See pages D-1 and D-3.						
GE S&S INT FUND		4/16/92	4,500	4,335		165
9b Amounts from Schedule D-1, line 9b						
9c Total of All Sales Price Amounts. Add column (d) of lines 9a and 9b ▶ 9c			4,500			
9d Other Transactions						

10 Long-term gain from sale or exchange of your home from Form 2119, line 17 or 23	10	
11 Long-term gain from installment sales from Form 6252, line 26 or 37	11	146
12 Long-term gain or (loss) from like-kind exchanges from Form 8824	12	
13 Net long-term gain or (loss) from partnerships, S corporations, and fiduciaries	13	
14 Capital gain distributions	14	
15 Gain from Form 4797, line 8 or 10	15	
16 Long-term capital loss carryover from 1991 Schedule D, line 43	16	
17 Add lines 9a, 9b, 9d, and 10 through 16, in columns (f) and (g)	17	311
18 Net long-term capital gain or (loss). Combine columns (f) and (g) of line 17	18	311

For Paperwork Reduction Act Notice, see Form 1040 instructions.

Schedule D (Form 1040) 1993 — Attachment Sequence No. 12A — Page 2

Name(s) shown on Form 1040 (Do not enter name and social security number if shown on other side.) — Your social security number

STEVEN H & MARCIA S SCHIFF — 360-40-7830

Part III Summary of Parts I and II

19	Combine lines 8 and 18 and enter the net gain or (loss). If a gain, also enter the gain on Form 1040, line 13. Note: If both lines 18 and 19 are gains, see Part IV below.	19	311
20	If line 19 is a (loss), enter here and as a (loss) on Form 1040, line 13, the smaller of: a The (loss) on line 19, or b ($3,000) or, if married filing a separate return, ($1,500). Note: When figuring whether line 20a or 20b is smaller, treat both numbers as positive. Complete Part V if the loss on line 19 is more than the loss on line 20 OR if Form 1040, line 37, is zero.	20	

Part IV Tax Computation Using Maximum Capital Gains Rate

USE THIS PART TO FIGURE YOUR TAX ONLY IF BOTH LINES 18 AND 19 ARE GAINS, AND:

You checked filing status box	AND	Form 1040, line 37, is over:	You checked filing status box:	AND	Form 1040, line 37, is over:
1		$51,900	3		$43,250
2 or 5		$86,500	4		$74,150

21	Enter the amount from Form 1040, line 37	21	127,747
22	Enter the smaller of line 18 or line 19	22	311
23	Subtract line 22 from line 21	23	127,436
24	Enter $21,450 if you checked filing status box 1, $35,800 if you checked filing status box 2 or 5, $17,900 if you checked filing status box 3, or $28,750 if you checked filing status box 4	24	35,800
25	Enter the greater of line 23 or line 24	25	127,436
26	Subtract line 25 from line 21	26	311
27	Figure the tax on the amount on line 25. Use the Tax Table or Tax Rate Schedules, whichever applies	27	32,256
28	Multiply line 26 by 28% (.28)	28	87
29	Add lines 27 and 28. Enter here and on Form 1040, line 38, and check the box for Schedule D.	29	32,343

Part V Capital Loss Carryovers from 1992 to 1993

30	Enter the amount from Form 1040, line 35. If a loss, enclose the amount in parentheses			30	
31	Enter the loss from line 20 as a positive amount			31	
32	Combine lines 30 and 31. If zero or less, enter -0-			32	
33	Enter the smaller of line 31 or line 32. Note: If both lines 8 and 20 are losses, go to line 34; otherwise, skip lines 34-38			33	
34	Enter the loss from line 8 as a positive amount			34	
35	Enter the gain, if any, from line 18		35		
36	Enter the amount from line 33		36		
37	Add lines 35 and 36			37	
38	Short-term capital loss carryover to 1993. Subtract line 37 from line 34. If zero or less, enter -0-			38	
	Note: If both lines 18 and 20 are losses, go to line 39; otherwise, skip lines 39-45				
39	Enter the loss from line 18 as a positive amount			39	
40	Enter the gain, if any, from line 8		40		
41	Enter the amount from line 33	41			
42	Enter the amount, if any, from line 34	42			
43	Subtract line 42 from line 41. If zero or less, enter -0-		43		
44	Add lines 40 and 43			44	
45	Long-term capital loss carryover to 1993. Subtract line 44 from line 39. If zero or less, enter -0-			45	

Part VI Election Not to Use the Installment Method. Complete this part only if you elect out of the installment method and report a note or other obligation at less than full face value.

46	Check here if you elect out of the installment method	▶ ☐
47	Enter the face amount of the note or other obligation	▶
48	Enter the percentage of valuation of the note or other obligation	▶ %

Part VII Reconciliation of Forms 1099-B for Bartering Transactions.

Complete this part only if you received one or more Forms 1099-B or substitute statements reporting **bartering income**.

			Amount of bartering income from Form 1099-B or substitute statement reported on form or schedule
49	Form 1040, line 22	49	
50	Schedule C, D, E, or F (specify) ▶	50	
51	Other form or schedule (identify). If nontaxable, indicate reason—attach additional sheets if necessary.	51	
52	Total. Add lines 49 through 51. This amount should be the same as the total bartering income on all Forms 1099-B and substitute statements received for bartering transactions.	52	

Form **2441**

Department of the Treasury
Internal Revenue Service (T)

Child and Dependent Care Expenses

▶ Attach to Form 1040.
▶ See separate instructions.

OMB No. 1545-0068

1992

Attachment Sequence No. 21

Name(s) shown on Form 1040: STEVEN H & MARCIA S SCHIFF

Your social security number: 360-40-7830

Caution: • If you have a child who was born in 1992 and the amount on Form 1040, line 32, is less than $22,370, see **A Change To Note** on page 1 of the instructions before completing this form.

• If you paid cash wages of $50 or more in a calendar quarter to an individual for services performed in your home, you must file an employment tax return. Get Form 942 for details.

Part I **Persons or Organizations Who Provided the Care — You must complete this part.** (See the instructions. If you need more space, use the bottom of page 2.)

1 (a) Care provider's Name	(b) Address (number, street, apt. no., city, state, and ZIP code)	(c) Identifying number (SSN or EIN)	(d) Amount paid (see instructions)
YMCA	ALBUQUERQUE NM		2,500

2 Add the amounts in column (d) of line 1 . . . . . 2 — 2,500

Next. Did you receive employer-provided dependent care benefits?

• YES. Complete Part III on the back now.

• NO. Complete Part II below.

Part II **Credit for Child and Dependent Care Expenses**

3 Enter the number of qualifying persons cared for in 1992. See the instructions to find out who is a qualifying person. Caution: To qualify the person(s) must have shared the same home with you in 1992 . . . . . ▶ 1

4 Enter the amount of qualified expenses you incurred and actually paid in 1992. See the instructions to find out which expenses qualify. Caution: If you completed Part III on page 2, do not include on this line any excluded benefits shown on line 25 . . . 4 — 2,500

5 Enter $2,400 ($4,800 if you paid for the care of two or more qualifying persons) . . . 5 — 2,400

6 If you completed Part III on page 2, enter the excluded benefits, if any, from line 25 . . . 6 — 0

7 Subtract line 6 from line 5. If the result is zero or less, skip lines 8 through 13, enter -0- on line 14, and go to line 15 . . . 7 — 2,400

8 Look at lines 4 and 7. Enter the smaller of the two amounts here . . . 8 — 2,400

9 You must enter your earned income. See the instructions for the definition of earned income . . . 9 — 122,677

Note: If you are not filing a joint return, go to "All other filers" on line 11 now.

10 If you are filing a joint return, you must enter your spouse's earned income. If your spouse was a student or disabled, see the instructions for the amount to enter . . . 10 — 32,829

11 • If you are filing a joint return, look at lines 9, 9, and 10. Enter the smallest of the three amounts here
• All others: look at lines 8 and 9. Enter the smaller of the two amounts here . . . 11 — 2,400

12 Enter the amount from Form 1040, line 32 . . . 12 — 158,458

13 Enter the decimal amount shown below that applies to the amount on line 12 . . . 13 — X 20%

If line 12 is: Over — But not over —	Decimal amount is:	If line 12 is: Over — But not over —	Decimal amount is:
$0 — 10,000	.30	$20,000 — 22,000	.24
10,000 — 12,000	.29	22,000 — 24,000	.23
12,000 — 14,000	.28	24,000 — 26,000	.22
14,000 — 16,000	.27	26,000 — 28,000	.21
16,000 — 18,000	.26	28,000 — No limit	.20
18,000 — 20,000	.25		

14 Multiply line 11 above by the decimal amount on line 13 . . . 14 — 480

15 Multiply any qualified expenses for 1991 that you paid in 1992 by the decimal amount that applies to the amount on your 1991 Form 1040, line 32, or Form 1040A, line 17. You must complete Part I and attach a statement. See the instructions . . . 15

16 Add lines 14 and 15. See the instructions for the amount of credit you can claim . . . 16 — 480

For Paperwork Reduction Act Notice, see separate instructions.

Form **2441** (1992)

Form 2441 (1992) Page 2

STEVEN H & MARCIA S SCHIFF 360-40-7830

Part III **Employer-Provided Dependent Care Benefits** — Complete this part only if you received employer-provided dependent care benefits

17	Enter the total amount of employer-provided dependent care benefits you received for 1992. This amount should be shown in box 22 of your W-2 form(s). Do not include amounts that were reported to you as wages in box 10 of Forms(s) W-2		17	
18	Enter the amount forfeited, if any. **Caution:** See the instructions		18	
19	Subtract line 18 from line 17		19	
20	Enter the total amount of qualified expenses incurred in 1992 for the care of a qualifying person. See the instructions	20		
21	Look at lines 19 and 20. Enter the **smaller** of the two amounts here	21		
22	You must enter your **earned income**. See the instructions for lines 9 and 10 for the definition of earned income. **Note:** If you are not filing a joint return, go to "All other filers" on line 24 now	22		
23	If you are filing a joint return, you must enter your spouse's earned income. If your spouse was a student or disabled, see the instructions for lines 9 and 10 for the amount to enter	23		
24	• If you are filing a joint return, look at lines 22 and 23. Enter the **smaller** of the two amounts here • All other filers, enter the amount from line 22 here	24		
25	**Excluded benefits.** Enter here the **smallest** of the following • The amount from line 21, or • The amount from line 24, or • $5,000 ($2,500 if married filing a separate return).		25	
26	**Taxable benefits.** Subtract line 25 from line 19. Enter the result, but not less than zero. Also, include this amount in the total on Form 1040, line 7. On the dotted line next to line 7, write "DCB."		26	

Next: If you are also claiming the child and dependent care credit, fill in Form 1040 through line 40. Then, complete Part II of this form.

FORM 2106

Department of the Treasury
Internal Revenue Service

EMPLOYEE
Business Expenses

▶ See separate instructions.
▶ Attach to Form 1040.

OMB No 1545-0139

1992

54

Your name	Social security number	Occupation in which expenses were incurred
STEVEN H SCHIFF	360-40-7830	US CONGRESSMAN

Part I Employee Business Expenses and Reimbursements

STEP 1 Enter Your Expenses		Column A Other Than Meals and Entertainment	Column B Meals and Entertainment
1 Vehicle expense from line 22 or line 29	1		
2 Parking fees, tolls, and local transportation, including train, bus, etc.	2		
3 Travel expense while away from home overnight, including lodging, airplane car rental, etc. Do not include meals and entertainment *	3	6,169	
4 Business expenses not included on lines 1 through 3. Do not include meals and entertainment *	4	450	
* SEE ATTACHED SCHEDULE			
5 Meals and entertainment expenses (See instructions)	5		
6 Total expenses. In Column A, add lines 1 through 4 and enter the result. In Column B, enter the amount from line 5	6	6,619	

Note: If you were not reimbursed for any expenses in Step 1, skip line 7 and enter the amount from line 6 on line 8.

STEP 2 Enter Amounts Your Employer Gave You for Expenses Listed in STEP 1			
7 Enter amounts your employer gave you that were not reported to you in box 10 of Form W-2. Include any amount reported under code "L" in box 17 of your Form W-2 (see instructions)	7		

STEP 3 Figure Expenses To Deduct on Schedule A (Form 1040)			
8 Subtract line 7 from line 6	8	6,619	
Note: If both columns of line 8 are zero, stop here. If Column A is less than zero, report the amount as income and enter -0- on line 10, Column A. See the instructions for how to report.			
9 Enter 20% (.20) of line 8, Column B	9		
10 Subtract line 9 from line 8	10	6,619	
11 Add the amounts on line 10 of both columns and enter the total here ALSO ENTER THE TOTAL ON SCHEDULE A,(FORM 1040), LINE 19. ▶	11		6,619

For Paperwork Reduction Act Notice, see instructions.

Form 2106 (1992)

Form **6252**

Department of the Treasury
Internal Revenue Service

Installment Sale Income

▶ See separate instructions. ▶ Attach to your tax return.
Use a separate form for each sale or other disposition of property on the installment method.

OMB No 1545-0228

1992

Attachment Sequence No **79**

Name(s) shown on return: STEVEN H & MARCIA S SCHIFF

Identifying number: 360-40-7830

1 Description of property ▶ COAL SE PROPERTY

2a Date acquired (month, day, and year) ▶ 3/01/70 b Date sold (month, day, and year) ▶ 1/01/73

3 Was the property sold to a related party after May 14, 1980? See instructions ☐ Yes [X] No

4 If the answer to question 3 is "Yes," was the property a marketable security? If "Yes," complete Part III. If "No," complete Part III for the year of sale and for 2 years after the year of sale ☐ Yes ☐ No

Part I **Gross Profit and Contract Price.** Complete this part for the year of sale only

5	Selling price including mortgages and other debts. Do not include interest whether stated or unstated		5	
6	Mortgages and other debts the buyer assumed or took the property subject to, but not new mortgages the buyer got from a bank or other source	6		
7	Subtract line 6 from line 5	7		
8	Cost or other basis of property sold	8		
9	Depreciation allowed or allowable	9		
10	Adjusted basis. Subtract line 9 from line 8	10		
11	Commissions and other expenses of sale	11		
12	Income recapture from Form 4797, Part III. See instructions	12		
13	Add lines 10, 11, and 12		13	
14	Subtract line 13 from line 5. If zero or less, do not complete the rest of this form		14	
15	If the property described on line 1 above was your main home, enter the total of lines 16 and 24 from Form 2119. Otherwise, enter -0-		15	
16	Gross profit. Subtract line 15 from line 14		16	
17	Subtract line 13 from line 6. If zero or less, enter -0-		17	
18	Contract price. Add line 7 and line 17		18	

Part II **Installment Sale Income.** Complete this part for the year of sale and any year you receive a payment or have certain debts you must treat as a payment on installment obligations.

19	Gross profit percentage. Divide line 16 by line 18. For years after the year of sale, see instructions		19	.231300
20	For year of sale only — Enter amount from line 17 above; otherwise, enter -0-		20	0
21	Payments received during year. See instructions. Do not include interest whether stated or unstated		21	633
22	Add lines 20 and 21		22	633
23	Payments received in prior years. See instructions. Do not include interest whether stated or unstated	23 7,542		
24	Installment sale income. Multiply line 22 by line 19		24	146
25	Part of line 24 that is ordinary income under recapture rules. See instructions		25	
26	Subtract line 25 from line 24. Enter here and on Schedule D or Form 4797. See instructions		26	146

Part III **Related Party Installment Sale Income.** Do not complete if you received the final payment this tax year.

27 Name, address, and taxpayer identifying number of related party

28 Did the related party, during this tax year, resell or dispose of the property ("second disposition")? ☐ Yes ☐ No

29 If the answer to question 28 is "Yes," complete lines 30 through 37 below unless one of the following conditions is met. Check only the box that applies.

a ☐ The second disposition was more than 2 years after the first disposition (other than dispositions of marketable securities). If this box is checked, enter the date of disposition (month, day, year) ▶

b ☐ The first disposition was a sale or exchange of stock to the issuing corporation

c ☐ The second disposition was an involuntary conversion where the threat of conversion occurred after the first disposition

d ☐ The second disposition occurred after the death of the original seller or buyer

e ☐ It can be established to the satisfaction of the Internal Revenue Service that tax avoidance was not a principal purpose for either of the dispositions. If this box is checked, attach an explanation. See instructions

30	Selling price of property sold by related party	30	
31	Enter contract price from line 18 for year of first sale	31	
32	Enter the smaller of line 30 or line 31	32	
33	Total payments received by the end of your 1992 tax year. Add lines 22 and 23	33	
34	Subtract line 33 from line 32. If zero or less, enter -0-	34	
35	Multiply line 34 by the gross profit percentage on line 19 for year of first sale	35	
36	Part of line 35 that is ordinary income under recapture rules. See instructions	36	
37	Subtract line 36 from line 35. Enter here and on Schedule D or Form 4797. See instructions	37	

For Paperwork Reduction Act Notice, see separate instructions.

Form **6252** (1992)

STEVEN H & MARCIA S SCHIFF 360-40-7830

SUPPORTING SCHEDULE OF EARNINGS: FORM 1040 - 1992

EMPLOYER'S NAME	T/P SPOUSE	GROSS AMOUNT	FEDERAL TAX WITHHELD	FICA/RRTA/ MEDICARE TAX WITHHELD	STATE TAX WITHHELD	CITY TAX WITHHELD
DEPT OF DEFENSE	S	7,799	1,024	484		
MEDICARE TAX W/H				113		
ETHICON INC	S	25,030	3,398	1,670	773	
MEDICARE TAX W/H				391		
SGT ARMS US HSE	T	122,677	29,634	3,441	8,345	
MEDICARE TAX W/H				1,872		
TOTALS		155,506	34,056	7,971	9,118	

STATEMENT 1040

STEVEN H & MARCIA S SCHIFF 360-40-7830

SCHEDULE A - ITEMIZED DEDUCTIONS SUPPORTING SCHEDULE - 1992

CONTRIBUTIONS

RECIPIENT	50 PCT.	CAP. GAIN	30 PCT OTHER	20 PCT.	NON CASH	TOTAL
NOT CASH CONTRIB.	6,750					
TOTAL	6,750					6,750
CARRYOVER						
ALLOWABLE	6,750					
ALLOWABLE CONTRIBUTIONS TO SCH. A, LINE 16						6,750

INTEREST

PAYEE	HOME MORTGAGE PAID TO FIN INST. FORM 1098 LINE 9A	INDIVIDUALS AND OTHERS LINE 9B	DEDUCTIBLE POINTS NO FORM 1098	INVESTMENT INTEREST
	430			
TOTAL SCH A LN 9A	430			
TOTAL SCH A LN 9B				
TOTAL SCH A LN 10				
TOTAL SCH A LN 11				

STATEMENT A

STEVEN H SCHIFF 1992 360-40-7830

FORM 2106 - SUPPLEMENTAL SCHEDULE

TRAVEL EXPENSES WHILE AWAY FROM HOME

OVERNIGHT TRAVEL EXPENSE	6,169
TOTAL TO PART I, LINE 3	6,169

OTHER BUSINESS EXPENSES

IN DISTRICT TRAVEL	450
TOTAL TO PART I, LINE 4	450

ITEMIZED DEDUCTIONS CARRIED TO SCHEDULE A

TOTAL TO SCHEDULE A, LINE 19	6,619
TOTAL FROM FORM 2106, LINE 11	6,619

STATEMENT 2106

IVENER & DEMKOVICH
CERTIFIED PUBLIC ACCOUNTANTS
3423 CENTRAL NE
ALBUQUERQUE, NEW MEXICO 87106

MR. STEVEN H & MRS. MARCIA S SCHIFF
804 SUMMIT NE
ALBUQUERQUE, NM 87106

DEAR STEVE AND MARCIA:

WE HAVE ENCLOSED TWO COPIES OF YOUR STATE INCOME TAX RETURN FOR 1992. THE ORIGINAL SHOULD BE DATED AND SIGNED BY YOU AND YOUR SPOUSE ON PAGE TWO.

THE SIGNED ORIGINAL COPY OF THE RETURN SHOULD BE MAILED ON OR BEFORE APRIL 15, 1993 TO:

STATE OF NEW MEXICO
TAXATION AND REVENUE DEPARTMENT
P.O. BOX 25122
SANTA FE, NEW MEXICO 87504-5122

YOUR TAX RETURN RESULTED IN AN OVERPAYMENT OF $ 104
WHICH WILL BE REFUNDED TO YOU.

VERY TRULY YOURS,

IVENER & DEMKOVICH
CERTIFIED PUBLIC ACCOUNTANTS

1992 NEW MEXICO PIT - 1
PERSONAL INCOME TAX LONG FORM

For the year January 1 December 31 1992 or other taxable year beginning 1992 ending [ ] AMENDED

Your first name & middle initial	Last name		Social Security Number	
STEVEN H	SCHIFF	1	360-40-7830	X RESIDENT / NONRESIDENT
Spouse's first name & middle initial	Last name		Social Security Number	
MARCIA S	SCHIFF	2	331-42-7371	X RESIDENT / NONRESIDENT

Your mailing address city state and zip: 804 SUMMIT NE ALBUQUERQUE, NM 87106

Name of Claimant for Deceased Taxpayer:

FILING STATUS (Check One)

3
- [ ] (1) Single
- [X] (2) Married filing jointly
- [ ] (3) Married filing separately (Enter spouse's Social Security Number on line 2)
- [ ] (4) Head of household — name of person that qualifies you as head of household
- [ ] (5) Qualifying widow(er) with dependent - Year spouse died

EXEMPTIONS

4a [X] Yourself
4b [X] Spouse

If someone (such as your parent) can claim you as a dependent, do not check box 4a.

Number of boxes checked on 4a and 4b: 4c — 2

5 DEPENDENTS Name	✓ if under age 1	If age 1 or older, dependent's social security number	Name	✓ if under age 1	If age 1 or older, dependent's social security number
JAIMI		585-98-8709			
DANIEL		525-41-3707			

Number of dependents listed in 5: 5 — 2

Add box 4c and 5 Total Exemptions: 6 — 4

INCOME AND ADJUSTMENTS

			For Department Use Only
7 Federal Adjusted Gross Income (from line 31, federal Form 1040 or line 18, 1040A or line 3, 1040EZ)	7	158,458	1
8 Interest and Dividends from all tax-exempt bonds (from line 8b of federal Form 1040 or Form 1040A) See instructions on page 7, also see the New Mexico tax-exempt bond deduction on line 13	8		2
9 Net Operating Loss Carry forward included in line 22 of federal Form 1040 (enter as a positive number). See instructions on page 7, also see the New Mexico carry forward deduction on line 14	9		2
10 Add lines 7 8 and 8 Enter total here This is your New Mexico Base Income	10	158,458	

DEDUCTIONS FROM BASE INCOME

11 Federal Deduction Amount (from line 34, federal Form 1040 or line 19, 1040A or line 4, 1040EZ)	11	21,695	4
12 Federal Exemption Amount (line 36, federal Form 1040 or line 21, 1040A or enter zero if you filed 1040EZ) NOTE for federal Form 1040EZ filers: your exemption amount is included on line 11 with your deduction. The deduction and exemption amounts are combined on line 4 of federal Form 1040EZ	12	9,016	
13 Deduction for New Mexico tax-exempt Interest and Dividends See instructions on page 7	13		5
14 Net Operating Loss Carry forward allowed under New Mexico law See instructions & worksheet on page 7	14		6
15 Interest received on U S Government Obligations	15	622	
16 Taxable Railroad Retirement Act Annuities and Benefits, Taxable Railroad Unemployment Insurance Act sick pay (Attach Form 1099R)	16		
17. Income of an Indian that was wholly earned on the reservation or pueblo of which the individual is an enrolled member while domiciled on that reservation or pueblo. I am enrolled as a member of the _____ Indian nation, tribe or pueblo. My enrollment or census number is _____ Spouse's number _____	17		
18 Deduction for persons age 65 and older, or for persons who are blind (See instructions and table on page 8) If you or your spouse are age 65 or older or blind check here 18a Yourself [ ] 18b Spouse [ ]	18		
19 Deduction for adoption of special needs children	19		
20 ADD lines 11 through 19 Enter total here	20	31,333	
21. SUBTRACT line 20 from line 10 Enter result here (If line 20 is greater than line 10, enter zero) THIS IS YOUR NEW MEXICO TAXABLE INCOME	21	127,125	

TAXES, REBATES AND CREDITS

TEVEN H & MARCIA S SCHIFF 360-40-7830

21a	Amount from line 21 New Mexico Taxable Income	21a	127,125
22	Tax on line 21a amount (Enter tax from appropriate tax rate table or schedule)	22	9,014
23	Enter amount of tax on lump sum distributions from worksheet on page 9 of instructions	23	0
24	ADD lines 22 and 23 Enter total here	24	9,014
25	Tax from line 17 PIT-B Form, Allocation and Apportionment Schedule (Attach PIT-B Form)	25	
26	Enter the amount from line 24 or if you completed the PIT-B Form, enter the amount from line 25	26	9,014
27	Credit for taxes paid to another state from worksheet, page 9 of instructions (Attach other state's return.)	27	
28	Geothermal Capital Investment Credit carry forward from line 11 of the INC-6 Form (Attach INC-6 Form)	28	
29	Cultural Properties Preservation Credit (Attach certification and PIT-4, Cultural Property Claim Form)	29	
30	ADD lines 27 28 and 29 Enter total here	30	
31	SUBTRACT line 30 from line 26 (If line 30 is greater than line 26, enter zero) THIS IS YOUR NET TAX	31	9,014
32	New Mexico Income Tax Withheld (ATTACH STATE COPY OF W-2 FORMS)	32	9,118
33	Prepayment of 1992 New Mexico Personal Income Taxes (See instructions on pages 4 and 9)	33	
34	Total claimed on Rebate and Credit Schedule (see line 22 of Schedule PIT-RC and Attach PIT-RC)	34	
	Amended Returns Only		
35	Enter the amount paid with the original tax return plus additional tax paid after it was filed	35	
36	ADD lines 32 through 35 Enter total here	36	9,118
	Amended Returns Only		
37	Enter the amount of any previous refund that you received for tax year 1992 If none, enter zero	37	
38	SUBTRACT line 37 from line 36 If line 37 is zero enter the amount from line 36	38	9,118
39	If line 31 is greater than line 38, the difference is the Tax Due. Enter the amount you owe	39	
40	If line 31 is less than line 38, the difference is the Refund Amount. Enter here	40	104

NEW MEXICO VOLUNTARY CONTRIBUTION FUNDS (Refund Donation Programs) -- If you wish to contribute any of your tax refund to any of the following funds complete PIT-D Form **Total fund contributions may not exceed the amount on line 40.**

SHARE WITH WILDLIFE — VETERAN'S NATIONAL CEMETERY FUND — NEW MEXICO SUBSTANCE ABUSE EDUCATION FUND

NEW MEXICO FOREST RE-LEAF PROGRAM — NEW MEXICO POLITICAL PARTIES

41	Total of voluntary fund contributions from line 7 of PIT-D Form (ATTACH PIT-D Form)	41	
42	SUBTRACT line 41 from line 40 and enter the amount here **THIS IS YOUR NET REFUND.**	42	104

- SIGN THE FORM
- ATTACH CHECK OR MONEY ORDER FOR FULL AMOUNT
- MAKE PAYABLE TO NEW MEXICO TAXATION AND REVENUE DEPARTMENT
- INDICATE SOCIAL SECURITY NUMBER ON CHECK OR MONEY ORDER

NOTE: THIS RETURN IS NOT COMPLETE UNLESS IT IS SIGNED BY THE TAXPAYER.

I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct and complete Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge

SIGN HERE

Your signature — Mo Day Year — Signature of preparer other than taxpayer

Spouse's signature (If filing jointly, BOTH must sign even if only one had income) — Mo Day Year — Preparer's NM CRS ID Number or SSN: 02007687008

IVENER & DEMKOVICH
CERTIFIED PUBLIC ACCOUNTANTS
3423 CENTRAL NE
ALBUQUERQUE, NEW MEXICO 87106

MAIL TO: Taxation and Revenue Department, P.O. Box 25122, Santa Fe, New Mexico 87504-5122

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

PATRICIA SCHROEDER
(Full Name)

2208 RAYBURN HOB (202) 225-4431
(Mailing Address) Daytime Telephone

WASHINGTON, D.C. 20515-0601

Filer Status	[X] Member of the U.S. House of Representatives	State: COLORADO District: 1ST	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

INSIDE MAIL
MC
(Office Use Only)

20

3491

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Patricia Schroeder

DATE (Month, Day, Year): MAY 16, 1993

Reporting Individual's Name
PATRICIA SCHROEDER

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	NONE (MEMBER)		
	KAPLAN RUSSIN + VECCHI (SPOUSE)	LAW PRACTICE	N/A
	(1/1/92 - 7/31/92)		
	WHITMAN + RANSOM		
	(8/1/92 - 12/31/92)		
	1215 17th ST., N.W.		
	WASHINGTON, D.C. 20036		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name

PATRICIA SCHROEDER

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	SEE ATTACHED LIST			

This page may be copied if more space is required.

Reporting Individual's Name
PATRICIA SCHROEDER

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the ler left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	
B, DC, JT — Examples: ABC Corporation Stock				X								X									X									X
George Wash. Credit Union Accounts					X									X									X							
182 Main Street, Dover, Delaware						X							X									X								
S — AFFILIATED FUND/ MUTUAL FUND SHARES					X							X			X							X								X
S — FOUNDERS GROWTH FUND/ MUTUAL FUND SHARES					X							X			X								X							X
S — KEMPER TAX EXEMPT FUND/ MONEY MARKET FUND DEPOSITS			X									X								X										
DC — FUND FOR GOVERNMENT INVESTORS MONEY MARKET FUND DEPOSITS			X									X								X										
DC — STRIPS – U.S. TREASURY / BONDS				X										X							X									
S — NEW YORK LIFE INS. CO./ INSURANCE DIVIDEND DEPOSITS				X										X							X									

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name: PATRICIA SCHROEDER

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
S	GNMA INCM FUND #K-UNITS INVESTMENT TRUST			X										X							X								
S	AMERICAN EXPRESS DAILY DIVIDEND FUND – MONEY MARKET		X									X								X									
S	SHEARSON LEHMAN EUROPEAN FUND – MUTUAL FUND SHS			X															X										X
S	CENTRAL BANK, DENVER, COLO. – CD'S			X										X							X								X
	SHEARSON LEHMAN IRA:																												
	SHEARSON LEHMAN APPRECIATION FUND – MUTUAL FUND SHS.					X						X		X								X							X
	GT GLOBAL EUROPEAN GROWTH FUND – MUTUAL FUND SHS.				X							X									X								
	STRIPS – U.S. TREASURY – BONDS				X									X						X									
	AMERICAN EXPRESS DAILY DIVIDEND FUND – MONEY MARKET		X									X								X									
	WOMEN'S NATIONAL BANK, DENVER, COLO. – CD'S			X										X						X									X

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: PATRICIA SCHROEDER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	AMERICAN EXPRESS MUNICIPAL MONEY MARKET FUND / DEPOSITS			X								X								X								
JT	UNIT 101, DAYTER PLACE CONDOMINIUM, DENVER, COLO.			X									X										X					
JT	UNIT 305, DAYTER PLACE CONDOMINIUM, DENVER, COLO.			X									X									X						
JT	REPRESENTATIVE, INC., DENVER, COLO. — STOCK		X																X									
	REPRESENTATIVE, INC., DENVER, COLO. - PROMISSORY NOTE		X																X									
JT	TDR ASSOCIATES, DENVER, COLO. - LIMITED PARTNERSHIP		X									X	X	X					X									
S	DREYFUS GOLD DEPOSITS — TROY OZS.		X																X									
S	SHEARSON LEHMAN UBS. DIRECT UNIT INVESTMENT TRUST #94-SHS		X									X								X								X
JT	MFS MUNICIPAL INCOME TRUST SBI — SHARES			X								X								X								X
JT	STRIPS - U.S. TREASURY - BONDS			X										X								X						
JT	GABELLI VALUE LINE FUND MUTUAL FUND SHARES		X									X			X						X							X
	RETIREMENT PROGRAMS:																											
S	SHEARSON LEHMAN IRA (CONSOLIDATING FORMER BROKV. ACCT.)																											
S	STRIPS - U.S. TREASURY - BONDS			X										X					X									
S	SHEARSON LEHMAN STRATEGIC INVESTORS PORTFOLIO — MUTUAL FUND			X								X			X								X					X

Schedule III—Continuation

Reporting Individual's Name: PATRICIA SCHROEDER

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	AFFILIATED FUND - INCOME REINVESTMENTS	X			PERIODIC	X						
S	FOUNDERS GROWTH FUND - INCOME REINVESTMENTS	X			12/31/92	X						
S	SHEARSON LEHMAN BROS. DIRECT UNIT INVESTMENT TRUST #94 SHS.		X		11/30/92	X						
JT	MFS MUNICIPAL INCOME TRUST SBI SHARES		X		12/17/92		X					
JT	GABELLI VALUE LINE FUND - INCOME REINVESTMENT	X			12/31/92	X						
S	SHEARSON LEHMAN STRATEGIC INVESTORS PORTFOLIO - INCOME REINVESTMENTS	X			PERIODIC	X						
S	SHEARSON LEHMAN EUROPEAN FUND - SHARES	X			2/4, 4/16, 12/10/92	X						
S	ROLLOVER EXPIRING CENTRAL BANK CD'S TO SHEARSON LEHMAN EUROPEAN FUND		X		1/22 AND 4/6/92	X						
	SHEARSON LEHMAN APPRECIATION FUND - SHARES	X			3/18/92	X						
	ROLLOVER EXPIRING WOMAN'S NATL BANK CD'S TO SHEARSON LEHMAN APPRECIATION FUND		X		3/6/92	X						

Reporting Individual's Name
PATRICIA SCHROEDER

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	WORLD SAVINGS, DENVER, COLO.	MORTGAGE ON UNIT 101, DENVER PLACE CONDO, DENVER, COLO.		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
PATRICIA SCHROEDER

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	SEE ATTACHED LIST						

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Reporting Individual's Name
PATRICIA SCHROEDER

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
SOLELY OF AN	NUMEROUS
HONORARY NATURE	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 80-536A (m)

3500

Rep. Pat Schroeder (Colorado-1st)
1992 Financial Disclosure Report

SOURCE: As speaker or conference participant unless otherwise noted	DISPOSITION TO CHARITY	REIMBURSED EXPENSES
1/2 Shell Environment, Shell Oil Company in Washington, DC Magazine Article	2000	0
1/3 Medical Home Project in Honolulu, HI	0	(air & food) Maui-Oahu-Maui
1/6-1/7 Town Hall of Cleveland in Cleveland, OH Processed by Greater Talent Network	2000	(air, food, & 1 night lodging) DC-Cleveland-DC
1/9 National Career Development Association in San Antonio, TX	2000	(air & food) DC-San Antonio-Denver
1/11-1/12 United Jewish Fund in Los Angeles, CA Processed by America Program Bureau	2000	(shared air, food, & 1 night lodging) Self: Denver-Los Angeles-Denver & Daughter: Newark-Los Angeles-Newark

1/12-1/13 University of Judaism in Los Angeles, CA Processed by America Program Bureau	2000	(shared air, food, & 1 night lodging) Self: Denver-Los Angeles-Denver & Daughter: Newark-Los Angeles-Newark
1/31 Washington University of St. Louis in St. Louis, MO	2000	(air & food) DC-St. Louis-DC
2/3 Columbia University, Graduate School of Journalism in New York City, NY	500	(air, food, & limousine service) DC-NY-DC
2/13 Working Mother Magazine in New York City, NY Roundtable Discussion	0	(air, food, & cab fare) DC-NY-DC
2/13-2/16 The Urban Institute in Boca Raton, FL Roundtable Discussion	0	(air, food, & 3 nights lodging) Self: NY-Fort Lauderdale-DC & Spouse: DC-Fort Lauderdale-DC
2/17 College and University Personnel Association in Washington, DC	2000	0
2/24-2/25 Meredith College in Raleigh, NC	2000	(shared air & food) DC-Raleigh-DC

2/24-2/25 Moore County Schools in Carthage, NC	2000	(shared air, food, & 1 night lodging) DC-Raleigh -DC
3/1-3/2 Arizona Nurses Association in Phoenix, AZ	2000	(air, food, & 1 night lodging) Denver-Phoenix-Chicago-DC
3/16 Old Dominion University in Norfolk VA	2000	(air & food) DC-Norfolk (private airplane) Norfolk-DC
3/23-3/24 Florida International University in Miami, FL	2000	(air, food, & 1 night lodging) DC-Miami-DC
3/30-3/31 National-Louis University in Evanston, IL	2000	(air, food, & 1 night lodging) Denver-Chicago-DC
4/2 Association of Reproductive Health Professionals in Washington, DC	2000	0
4/3 California Nurses Association in San Francisco, CA	2000	(shared air & food) DC-San Francisco -Denver
4/3 Stanford University in Stanford, CA	2000	(shared air & food) DC-San Francisco -Denver

4/12-4/13 First Unitarian Society of Minneapolis in Minneapolis, MN	2000	(air, food, & 1 night lodging) Denver-Minneapolis-New York
4/13-4/14 Princeton Club of New York in New York City, NY	0	(cab fare, food, & 1 night lodging) Spouse: (air) DC-NY-DC
4/14 Trenton State College in Trenton, NJ	2000	(shared air, shared limousine, & food) Newark-Chicago
4/14-4/15 Resource Center for Women in Summit, NJ	2000	(shared air, shared limousine, food, & 1 night lodging) Newark-Chicago
4/15-4/17 Planned Parenthood of Hawaii in Honolulu, HI	0	(air, food, & 2 nights lodging) Self: Chicago-Honolulu & Spouse: DC-Chicago-Honolulu-Chicago-DC
4/23-4/24 University of Seattle in Seattle, WA Processed by K&S Speakers	2000	(air, food, 1 night lodging, & cab fare) Denver-Seattle-Denver

4/29 National Council of Juvenile and Family Court Judges in Crystal City, VA	150	0
5/1 National Head Start Association in San Diego, CA	0	(air & food) DC-San Diego-Denver
5/4 Teachers College at Columbia University in New York City, NY	0	(air & food) DC-NY-DC
5/11-5/12 "Discussion with Bill Moyers" in New York City, NY Television Appearance	0	(air, food, cab fare, & 1 night lodging) DC-NY-DC
5/16 Rep. Peter Kostmayer for Congress in Newtown, PA	0	(air & food) DC-Philadelphia-DC
5/16 Bryn Mawr College in Bryn Mawr, PA	2000	(shared air & food) DC-Philadelphia-Denver
5/20 Association of Trial Lawyers of America in Washington, DC	2000	0
5/24 Mt. Holyoke College in South Hadley, MA	300	(food only)
5/24 Rep. John Olver for Congress in Amherst, MA	0	(air & food) Baltimore-Hartford-DC

5/30-5/31 Bay Area Municipal Elections Committee (BAYMEC) in San Jose, CA	2000	(air, food, & 1 night lodging) Self: Denver-San Francisco -DC & Aide: DC-San Francisco -DC
6/11 American Academy of Nurse Practitioners in Washington, DC	400	0
6/14-6/15 Chi Omega Foundation in Orlando, FL	0	(air, food, & 1 night lodging) Self: DC-Orlando & Daughter: DC-Orlando -DC
6/15 Children's Action Network in Los Angeles, CA Television Appearance	0	(air only) Orlando-Los Angeles -DC
6/18 American College of Sports Medicine Foundation in Washington, DC	1000	(parking fee)
6/27 American Library Association in San Francisco, CA	2000	(air & food) DC-San Francisco -DC
7/31-8/2 Federation of Insurance and Corporate Counsel in Colorado Springs, CO	0	(air, food, & 2 nights lodging) Self & Spouse: DC-Denver
9/5 Iredell County Democratic Party in Statesville, NC	0	(air & food) DC-Charlotte -DC

9/7-9/8 Rep. Sam Gejdenson for Congress in Hartford, CT	0	(air, food, & 1 night lodging) DC-Hartford -DC
9/13 Women's Health Forum hosted by Rep. William D. Ford and Rep. John D. Dingell in Detroit, MI	0	(air only) Denver-Detroit-DC
9/21-9/22 American Federation of State, County, and Municipal Employees in New York City, NY	0	(air, food, cab fare, & 1 night lodging)
9/24 General Electric Information Services in Washington, DC	2000	0
10/9 New Woman Magazine in New York City, NY Magazine article	2000	0
10/13-10/14 Women's Issues Network in Chicago, IL	0	(shared air, food, 1 night lodging cab fare) DC-Chicago
10/13 Democratic National Committee for Statewide Ticket in Chicago and Carbondale, IL	0	(shared air) DC-Chicago (private air) Palwaukee-Carbondale -Chicago
10/14 Rep. Gerry Sikorski for Congress in Minneapolis, MN	0	(shared air, & food) Chicago-Minneapolis -Denver

10/18 Massachusetts Breast Cancer Coalition in Boston, MA	500	(air only) DC-Boston
10/18-10/20 Democratic National Committee for Statewide Ticket in Philadelphia, Reading, King of Prussia, and Harrisburg, PA 10/21 Democratic National Committee for Statewide Ticket in Tucson and Phoenix, AZ	0	(air, food, & 2 nights lodging) Boston-Philadelphia -Harrisburg -Chicago -Denver -Phoenix -Tucson
10/26 Democratic National Committee for Statewide Ticket in Portland, OR, and Seattle, WA	0	(air & food) Self: Denver-Portland-Seattle-Denver & Aide: DC-Denver-Portland-Seattle-DC
11/4-11/5 University of California (San Diego) and Tokos Medical Corporation in San Diego, CA	2000	(air, food, & 1 night lodging) Self: Denver-San Diego -DC & Aide: DC-San Diego-DC
11/6 National Academy of Television Arts and Sciences in New York City, NY Ceremony to honor Phil Donahue	0	(air, food, limousine service, & 1 night lodging) Self: & Spouse: DC-NY

11/7-11/8 American Civil Liberties Union of Ohio Foundation in Columbus, OH	2000	(shared air, food, & 1 night lodging) Self & Spouse: NY-Columbus-DC
11/8 Ohio Department of Education, Tech-Prep Program in Columbus, OH	2000	(shared air) Self & Spouse: NY-Columbus-DC
11/9 Duke University in Durham, North Carolina	2000	(shared air, & food) DC-Raleigh-Durham-DC
11/9-11/10 University of North Carolina in Chapel Hill, NC	2000	(shared air, food, & 1 night lodging) DC-Raleigh-Durham-DC
11/11 Johns Hopkins University in Baltimore, MD	2000	0
11/12 Minneapolis Women's Club in Minneapolis, MN Processed by Capital Speakers, Inc.	2000	(air & food) DC-Minneapolis-DC
11/16-11/17 Washington University of St. Louis Medical School in St. Louis, MO	2000	(air & food) DC-St. Louis-DC
12/10 General Clinical Research Center Program Directors in Reston, VA	2000	(food only)

12/22 Nightline, ABC News in Maui, Hawaii Television Appearance	0	(parking fee)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

Charles E. Schumer
(Full Name)

Rayburn House Office Bldg - Washington DC.
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District:	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED

ma (Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Charles Schumer

DATE (Month, Day, Year) 5/13/93

Reporting Individual's Name
Charles Schumer

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	US House of Representatives	Member Salary	189,133. [redacted]
	City of NY	Spouses Salary	96,968. [redacted]

For payments to charity in lieu of honoraria, use Schedule II

Page ___ of ___

Schedule I

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Reporting Individual's Name
Charles Schumer

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S	ABC Corporation Stock			X								X								X								X
	George Wash. Credit Union Accounts				X									X								X						
	182 Main Street, Dover, Delaware					X							X								X							
	Dreyfus 100% US Treas Fund					X								X								X						
	Value Line - Money Mkt Acct.			X								X							X									
	Citibank - US Savings Bonds			X										X						X								
JT	Citibank - CD			X										X					X									
DC	Resources Accrued Mtg - L.P.			X								X							X									
S	Merrill Lynch o Treas - IRA				X									X							X							

For additional assets and unearned income, use next page

Page ___ of ___

Schedule III

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles Schumer

SP, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
JT	Dreyfus 100% US Treas Fund			X										X								X							
JT	Citibank - Checking		X																X										
JT	Citibank - Savings	X												X						X									
S	Resources Trust Co - IRA		X											X							X								
	Resources Trust Co - IRA		X											X							X								
	Gov't Secs Income - US Treas (IRA)		X											X							X								
S	Gov't Secs Income - US Treas. (IRA)		X											X							X								

Page ___ of ___

Schedule III—Continuation

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Reporting Individual's Name: Charles Schumer

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Resources Trust Co – IRA		X		12/28/92	X						
S	Resources Trust Co – IRA		X		12/28/92	X						
	Govt Secs Income Fund US Treas – IRA	X			12/28/92	X						
S	Govt Secs Income Fund US Treas – IRA	X			12/28/92	X						

Schedule IV

Page ___ of ___

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Reporting Individual's Name
Charles Schumer

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Independence Savings Bank-residence (legal)	Mortgage on 9 PPW - BKlyn			X				
JT	Congressional Credit Union	Auto Loan (Family Car)	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
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MAY 17 1993

MC

(Office Use Only)

3517

Robert C. "Bobby" Scott
(Full Name)

7501 River Road, Plaza C
(Mailing Address)

Newport News VA 23607 — Daytime Telephone (202) 225-8351

Filer Status	[X] Member of the U.S. House of Representatives	State: Virginia District: 3	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature] — DATE (Month, Day, Year): MAY 17, 1993

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Robert C. Scott, Attorney at law	Private law Practice	11,000
	Senate of Virginia	Legislative Salary	22,200

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	FLORIDA Memorial College	commencement speech	MAY 8, 1993	$1,000
	(speech made on May 8, 1993; donation to be mailed directly to charity sometime during the week of May 17, 1993)			

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) a None	Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	O $500,001 – $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX over $1,000,000	Block D Transaction (X)
S	ABC Corporation Stock			X								X									X								X
	Examples: George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
	Albertsons - Stock	X										X			X						X								
	AT + T - Stock			X								X								X									
	Becton Dickinson - Stock	X										X			X						X								
	Blockbuster - Stock	X										X			X							X							
	Circuit City - Stock	X										X			X								X						
	Coca Cola - Stock	X										X			X						X								

For additional assets and unearned income, use next page

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert C. "Bobby" Scott

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT	A None	S Less than $1,001	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX over $1,000,000	
Deluxe Corp - Stock	X										X			X						X								
EQUIFAX - Stock	X										X			X						X								
Fedders Corp - Stock	X													X						X								
Flight Safety - Stock	X										X			X						X								
nView - Stock	X													X							X							
Ogden - Stock	X										X			X						X								
Pepsico Stock	X										X			X							X							
Rubbermaid - Stock	X										X			X							X							
Waste Management - Stock	X										X			X						X								
Solomon Brothers Fund - Stock	X										X			X					X									
Professional Bus. Associates (Investment Club) - A			X							see ATTached	X			X					X									
Ford Motor - Stock	X										X			X							X							
~~[illegible]~~																												
International Flavors & Fragrance Stock	X										X			X						X								
Merck - Stock	X										X			X							X							

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert C. "Bobby" Scott

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Syntex - Stock	X										X			X							X						
	Wendy's - Stock	X										X			X						X							
	Colgate - Palmolive - Stock			X								X								X								
	Chevy Chase Bank - Md.			X															X									
	New Atlantic Bank - VA			X															X									
	Deferred Inc./Comm of VA				X													asset growth			X							

Schedule III—Continuation

3522

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Aetna Life + Casualty Co. - Stock		X		4-30-92	X						
	Albertsons - Stock		X		4-16-92	X						
	Automatic Data Processing - Stock		X		4-30-92	X						
	Becton Dickinson + Co - Stock		X		4-16-92	X						
	Blockbuster Entertainment - Stock		X		4-16-92	X						
	Blockbuster Entertainment - Stock		X		4-30-92	X						
	CPI Corp - Stock		X		4-30-92	X						
	Circuit City - Stock		X		4-16-92	X						
	Circuit City - Stock		X		4-30-92	X						
	Coca Cola - Stock		X		4-16-92	X						
	Deluxe Corp - Stock		X		4-30-92	X						
	EQUIFAX - Stock		X		4-16-92	X						
	Fedders - Stock		X		4-30-92	X						
	Flight Safety Int'l - Stock		X		4-30-92	X						
	GLAXO - Stock		X		4-30-92	X						
	Hong Kong Tele - Stock		X		4-16-92	X						
	IBM - Stock		X		4-30-92	X						

70-599 O—93——25

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Luby's Cafeterias - Stock		X		4-30-92	X						
	nView Corp - Stock		X		4-30-92	X						
	Ogden Corp - Stock		X		4-16-92	X						
	Penn Central - Stock		X		4-30-92	X						
	Pepsi Co - Stock		X		4-16-92	X						
	Rubbermaid - Stock		X		4-30-92	X						
	Solomon Brothers Fund - Stock		X		12-21-92	X						
	Sara Lee Corp - Stock		X		4-30-92	X						
	Waste Management - Stock		X		4-16-92	X						
	JUNDT Growth Fund - Stock	X			4-15-93	X						
	Borden - Stock		X		5-18-92	X						
	Fedders - Stock		X		5-27-92	X						
	Ford Motor Corp - Stock		X		5-18-92	X						
	General Re Corp - Stock		X		5-18-92	X						
	Heinz, HJ - Stock		X		5-27-92	X						
	I.B.M - Stock		X		5-27-92	X						
	International Flavors + Fragrances - Stock		X		5-18-92	X						

Schedule IV

Reporting Individual's Name

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Merck - Stock		X		5-27-92	X						
	Pepsico - Stock		X		5-27-92	X						
	Potomac Electric Power - Stock		X		5-27-92	X						
	Safety Kleen - Stock		X		5-18-92	X						
	St. Paul's Co's - Stock		X		5-18-92	X						
	Syntex - Stock		X		5-18-92	X						
	U.S. West - Stock		X		5-27-92	X						
	Wendy's - Stock		X		5-27-92	X						
	Westinghouse - Stock		X		5-27-92	X						
	~~[illegible]~~											
	Sale of Deferred Comp/Comm of VA		X		April 93		X					

Schedule

Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	New Atlantic Bank, Norfolk, VA	Personal Loan		X					
	Tidemark S+L (Newport News S+L), VA.	Mortgage on former Residence				X			
	Wheat First Securities, Margin Acct	Margin Acct/Stocks			X				

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
Virginia Legislative Black Caucus	Engraved Clock (exempt)	400.00

Use additional sheets if more space is required.

Schedules V and VI

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Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6–13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Florida Memorial College (Commencement Address - travel reimbursement only)	MAY 8, 1992	Norfolk, VA - Miami FL - Norfolk, VA	N	Y	NONE	N

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Reporting Individual's Name
Robert C. "Bobby" Scott

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board member	Peninsula Council Boy Scouts of America
Board member	Pen. Assoc for Sickle Cell Anemia

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO 1989 89-666A (pm)

PROFESSIONAL INVESTMENT ASSOCIATES

Valuation Statement
Prepared 05/01/93 for Meeting 05/17/93

COMPANY	# SH	TOTAL COST	COST PER SH	PRICE 04/30/93	TOTAL VALUE	UNREALIZED GAIN/LOSS
Abbott Labs	200	$4,929.66	$24.65	$27.88	$5,575.00	845.34
01/23/91 80 @ 21.313						
05/21/91 50 @ 25.563						
07/17/91 70 @ 25.563						
Automatic Data	80	2,607.18	32.59	49.25	3,940.00	1,332.82
05/22/90 40 @ 29.313						
09/17/91 40 @ 33.50						
Coca-Cola	250	8,776.21	35.10	39.38	9,843.75	1,067.54
05/22/90 100@ 22.00						
03/17/92 50 @ 41.125						
05/19/92 50 @ 44.50						
07/21/92 50 @ 41.375						
* Dollar General	312	5,331.53	17.06	25.63	7,995.00	2,663.47
01/28/92 38.75 @ 14.60						
05/19/92 211.25 @ 16.60						
07/21/92 62 @ 17.40						
General Electric	45	2,818.15	62.63	90.63	4,078.13	1,259.97
03/20/90 25 @ 64.75						
11/20/90 20 @ 55.125						
Heinz, H.J.	40	1,563.22	39.08	36.75	1,470.00	(93.22)
05/21/91 40 @ 37.75						
Hong Kong Telec.	100	3,140.27	31.40	39.75	3,975.00	834.73
11/19/91 100@ 30.75						
Intl Flavors & Fr	25	2,024.98	81.00	112.25	2,806.25	781.27
07/17/91 25 @ 78.75						
Johnson & Johnson	100	5,181.90	51.82	43.63	4,362.50	(819.40)
09/22/92 60 @ 51.00						
11/17/92 40 @ 50.00						

* DOLR adjusted for 5 for 4 stock split as of 03/01/93

Member's share - May 17, 1993: 10%

Professional Investment Associates (Cont'd)

COMPANY	# SH	TOTAL COST	COST PER SH	PRICE 04/30/93	TOTAL VALUE	UNREALIZED GAIN/LOSS
McDonalds	76.7	3,181.16	41.17	48.13	3,695.57	534.41
06/11/91 1.327 @ 28.84						
09/04/91 3.101 @ 32.25						
09/18/91 .012 @ 32.943						
10/16/91 2.768 @ 36.125						
12/02/91 2.963 @ 33.75						
12/18/91 .018 @ 36.469						
02/18/92 2.326 @ 43.00						
03/20/92 .027 @ 43.167						
04/01/92 12.50 @ 40.00						
06/19/92 .055 @ 45.405						
06/19/92 22.024 @ 45.405						
08/03/92 17.574 @ 42.677						
09/18/92 .145 @ 44.75						
10/16/92 4.689 @ 42.657						
12/18/92 5.106 @ 48.96						
12/18/92 .142 @ 48.96						
03/19/93 .140 @ 53.601						
04/01/93 1.874 @ 53.372						
Microsoft	45	3,931.61	87.37	85.50	3,847.50	(84.11)
09/22/92 25 @ 78.25						
11/17/92 20 @ 93.25						
Mylan Labs	250	3,104.29	12.42	27.13	6,781.25	3,676.96
09/18/90 50 @ 9.6875						
11/20/90 120@ 9.00						
03/17/92 80 @ 17.8125						
Proctor & Gamble	130	6,919.03	53.22	49.13	6,386.25	(532.78)
05/19/92 100@ 51.625						
11/17/92 30 @ 54.125						
QVC Network	50	1,128.54	22.57	52.50	2,625.00	1,496.46
07/21/92 50 @ 22.00						
Rubbermaid	75	2,578.41	34.38	31.50	2,362.50	(215.91)
11/17/92 75 @ 33.50						
*Synovus Financial	150	1,597.27	10.65	18.63	2,793.75	1,196.48
03/19/91 150@ 10.33						
Toys R Us	150	5,416.27	36.11	36.88	5,531.25	114.98
05/19/91 100@ 33.00						
09/22/92 50 @ 39.75						

* SNV adjusted for 3 for 2 stock split 04/02/93

Professional Investment Associates (Cont'd) Pg.3 of 8

COMPANY	# SH	TOTAL COST	COST PER SH	PRICE 04/30/93	TOTAL VALUE	UNREALIZED GAIN/LOSS
Tseng Labs	150	2,421.64	16.14	16.25	2,437.50	15.86
11/17/92 150@ 15.63						
Vulcan Materials	50	1,788.18	35.76	44.00	2,200.00	411.82
03/19/92 50 @ 34.75						
Cash-on-Hand					2,962.72	
Due from Members					2,700.01	
Total Value					$88,368.92	$14,286.69

Dow Jones Industrial Average

05/08/92	3369.41
07/10/92	3330.56
09/11/92	3305.70
11/06/92	3240.06
01/08/93	3251.67
03/05/93	3404.58
04/30/93	3427.55

SUPPLEMENTAL INFORMATION

COMPANY	SYM	V-L VOL: RANK	52-WK HIGH	52-WK LOW	STOCK MGR.	YD	PE	ESP ST	REL ST
Abbott Labs	ABT	1:3-1	34.00	22.63	Price	2.4	18	84	30
Automatic Data	AUD	13:2-1	56.13	38.75	Unassgn	0.9	24	82	43
Coca-Cola	KO	10:2-1	45.38	36.50	Unassgn	1.7	26	84	31
Dollar General	DOLR	11:1-3u	30.00	14.13	Clark	0.8	25	97	83
General Electric	GE	7:3-1	96.00	73.00	Reid	2.8	16	77	63
Heinz, H.J.	HNZ	10:2-1	45.50	35.25	Unassgn	3.3	16	91	26
Hong Kong Telec.	HKT	5:3-2	40.75	30.63	Unassgn	4.0	19	84	56
Intl Flavors	IFF	3:2-1	119.50	94.50	Stiff	2.7	24	81	43
Johnson & Johnson	JNJ	1:3-1d	54.75	37.63	Price	2.4	17	84	26
McDonalds	MCD	2:3-1	54.25	40.88	Unassgn	0.8	18	77	47
Microsoft	MSFT	13:2-3	95.00	65.50	Unassgn		29	96	51
Mylan Labs	MYL	8:2-3d	37.63	16.75	Unassgn	0.4	29	98	53
Proctor & Gamble	PG	6:2-1	55.75	45.25	Gore	2.2	19	71	31
QVC Network	QVCN	11:1-4	60.50	16.25	Clark		39	86	97
Rubbermaid	RBD	6:2-2	35.13	27.00	Gore	1.2	26	94	36
Synovus Financial	SNV	13:1-3u	20.38	13.25	Unassgn	2.0	19	87	70
Toys R Us	TOY	11:2-3	42.38	31.00	Clark		25	81	47
Tseng Labs	TSNG	6:1-4	23.38	9.50	Gore		21	86	70
Vulcan Materials	VMC	6:4-1d	56.13	38.50	Gore	2.9	19	41	37

UNIT ANALYSIS

Total # Units This Date	390
Value of Each Unit This Date (88368.92/390)	226.59
Number of Units Each $200.00 Deposit at 05/17/93 Meeting Will Purchase (200/226.59)	.8827

	Value of Account Last Mo.	% of Total Value	Dist of Inc or Dec in Value	Members New Bal	Deposit This Mo.	Members Bal Prior to 03/15 Meeting
Each Member	$8,376.22	10.00	$460.67	$8,836.89	$400.00	$9,236.89
	$116,596.01	100.00	($28,227.09)	$88,368.92	$4,000.00	$92,368.92

RECONCILIATION OF CASH

Balance Last Month			$2,867.46
Plus:	Mar-Apr Assessments (Rec'd)	3,400.00	
	Mar-Apr Assessments (Due)	2,900.01	
	Interest	16.50	
	Dividends	348.22	
	Miscellaneous Credits	11.50	
	Sales:		
	200 sh. Philip Morris @ 65.13 (13025.00 - 154.60)	12,870.40	
	50 sh. QVC Network @ 57.25 (2862.50 - 70.59)	2,791.91	
	100 sh. Waste Management @ 37.00 (3700.00 - 77.38)	3,622.62	25,959.16
			28,826.62
Less:	Purchases		
	.140 sh. McDonalds @ 53.601 (7.48 + 0.00)	7.48	
	1.874 sh. McDonalds @ 53.372 (100.00 + 0.00)	100.00	
	Expenses		
	Accounting expense	200.00	
	NAIC Dues and Expenses		
	Value Line Subscription	525.00	
	Withdrawing Members (Maxwell)	7,190.47	
	" (Rainey)	7,570.47	
	" (Franklin)	7,570.47	
			23,163.89
Total Cash on Hand (Rec'd and Due)			5,662.73
		Due	$2,700.01
		Rec'd	2,962.72

DIVIDENDS

DATE	COMPANY	YIELD TO TOTAL COST	CURRENT YIELD	AMOUNT
03/01/93	Rubbermaid	1.13%	1.24%	7.31
03/09/93	Johnson & Johnson	1.78%	2.11%	23.00
03/10/93	Vulcan Materials	3.52%	2.88%	15.75
03/12/93	Dollar General	3.18%	2.70%	12.50
03/16/93	GSP-Gov't Sec	N/A	N/A	2.30
03/19/93	McDonalds	0.95%	0.81%	7.48
04/01/93	Automatic Data Proc.	0.75%	0.93%	9.20
04/01/93	Coca-Cola	1.94%	1.73%	42.50
04/01/93	Synovous Financial	3.50%	2.00%	13.99
04/01/93	Waste Management	0.68%	N/A	13.00
04/08/93	Intl Flavors & Frag.	3.70%	2.67%	18.75
04/12/93	Heinz, H. J.	3.07%	3.27%	12.00
04/12/93	Philip Morris	4.01%	N/A	130.00
04/15/93	Mylan Labs	0.97%	0.44%	7.50
04/16/93	GSP-Govt Sec	N/A	N/A	2.59
04/26/93	General Electric	4.02%	2.78%	28.35
TOTAL				$346.22

HOW THEY RANK

(based on a comparison of the cost per share and the current price per share)

	% Inc. in Value	% of Total Portfolio	% of Stock Portfolio	Beta	Portfolio Beta
1. QVC Network	132.60%	2.97%	3.17%	1.60	5.08%
2. Mylan Labs	118.45%	7.87%	8.20%	1.25	10.25%
3. Synovus Financial	74.91%	3.16%	3.38%	0.60	2.03%
4. Automatic Data	51.12%	4.46%	4.76%	1.15	5.48%
5. Dollar General	50.20%	9.05%	9.68%	1.05	10.16%
6. General Electric	44.71%	4.61%	4.93%	1.15	5.67%
7. Intl Flavors	38.58%	3.18%	3.39%	1.15	3.90%
8. Hong kong Telec.	26.58%	4.50%	4.81%	0.70	3.36%
9. Vulcan Materials	23.03%	2.49%	2.66%	0.75	1.99%
10. McDonalds	16.91%	4.18%	4.47%	1.05	4.69%
11. Abbott Labs	13.09%	6.31%	6.74%	1.20	8.09%
12. Coca-Cola	12.16%	11.14%	11.90%	1.15	13.69%
13. Toys R Us	2.12%	6.26%	6.69%	1.35	9.03%
14. Tseng Labs	0.65%	2.76%	2.95%	1.55	4.57%
15. Rubbermaid	-4.74%	2.67%	2.86%	1.20	3.43%
16. Microsoft	-5.29%	4.35%	4.65%	1.25	5.81%
17. Heinz, H.J.	-5.96%	1.66%	1.78%	0.95	1.69%
18. Proctor & Gamble	-7.70%	7.23%	7.72%	1.10	8.49%
19. Johnson & Johnson	-22.08%	4.94%	5.27%	1.15	6.06%
CASH & DUE		6.41%			
		100.00%	100.00%		1.13

STANDING ORDERS

None

INCOME STATEMENT
For Period from 01/01/93-04/30/93

INCOME		
Interest	$16.50	
Dividends	659.03	
Gain on Sale of Securities	1,137.98	
Miscellaneous Credits		
Total Income		$1,813.51
EXPENSES		
Accounting Expense	$400.00	
Subscriptions- Value Line	525.00	
NAIC Dues	0.00	
Bank Charge	0.00	
Total Expense		$925.00
Gain (Loss) for Year		$888.51

BALANCE STATEMENT
As of 04/30/93

ASSETS		
Cash on Hand w/ broker	$1,487.37	
Cash on Hand in Bank	1,475.35	
Due from Members	2,700.01	
Investments	68,512.37	
Suspense	2,616.30	
Total Assets		$76,791.40
EQUITIES		
Capital Account-Member's Investment	$79,778.65	
Retained Earnings	(3,875.76)	
Gain (Loss) for Year	888.51	
Total Equities		$76,791.40

PROFESSIONAL INVESTMENT ASSOCIATES

Valuation Statement
As of December 31, 1992

COMPANY	# SH	TOTAL COST	COST PER SH	PRICE 12/31/92	TOTAL VALUE	UNREALIZED GAIN/LOSS
Abbott Labs	200	$4,929.66	$24.65	$30.38	$6,075.00	1,145.34
Automatic Data	80	2,607.18	32.59	53.13	4,250.00	1,642.82
Coca-Cola	250	8,776.21	35.10	41.88	10,468.75	1,692.54
Dollar General	250	5,331.53	21.33	28.25	7,062.50	1,730.97
General Electric	45	2,818.15	62.63	85.50	3,847.50	1,029.35
Heinz, H.J.	40	1,563.22	39.08	44.13	1,765.00	201.78
Hong Kong Telec.	100	3,140.27	31.40	36.88	3,687.50	547.23
Intl Flavors & Fr	25	2,024.98	81.00	108.75	2,718.75	693.77
Johnson & Johnson	100	5,181.90	51.82	50.50	5,050.00	(131.90)
McDonalds	74.7	3,161.16	42.27	48.75	3,645.38	484.22
Microsoft	45	3,931.61	87.37	85.38	3,841.88	(89.73)
Mylan Labs	250	3,104.29	12.42	31.50	7,875.00	4,770.71
Philip Morris	200	12,958.12	64.79	77.13	15,425.00	2,466.88
Proctor & Gamble	130	6,919.03	53.22	53.63	6,971.25	52.22
QVC Network	100	2,257.08	22.57	38.88	3,887.50	1,630.42
Rubbermaid	75	2,578.41	34.38	31.75	2,381.25	(197.16)
Synovus Financial	100	1,597.27	15.97	23.13	2,312.50	715.23
Toys R Us	150	5,416.27	36.11	40.13	6,018.75	602.48
Tseng Labs	150	2,421.64	16.14	14.25	2,137.50	(284.14)
Vulcan Materials	50	1,788.18	35.76	48.25	2,412.50	624.32
Waste Management	200	7,702.22	38.51	40.00	8,000.00	297.78
Cash-on-Hand					1,403.54	
Due from Members					4,109.01	
Total Value					$115,346.05	$19,625.13

[member value: $\frac{1}{14}$ of total as of end.]

PROFESSIONAL INVESTMENT ASSOCIATES

INCOME STATEMENT
For Period from 01-01-92 to 12-31-92

Income			
	Interest	$98.13	
	Dividends	1,828.78	
	Gain (Loss) on Sale of Securities	(186.07)	
	Total Income		$1,740.84
Expenses			
	Accounting Expense	1,200.00	
	Subscriptions- Value Line	525.00	
	NAIC Dues	212.00	
	Bank Charge	1.50	
	Total Expenses		$1,938.50
	Gain (Loss) for Year		($197.66)

BALANCE STATEMENT
As of 12-31-92

Assets			
	Cash on Hand w/ Broker	$799.87	
	Cash on Hand in Bank	603.67	
	Due from Member	4,109.01	
	Investments	90,202.86	
	Suspense	(315.15)	
	Total Assets		$95,400.26
Equities			
	Capital Account-Member's Investment	99,276.02	
	Retained Earnings	(3,678.10)	
	Gain (Loss) for Year	(197.66)	
	Total Equities		$95,400.26

PROFESSIONAL INVESTMENT ASSOCIATES

1992 End of Year Summary

Interest

Consolidated Bank & Trust	Date	Amount
Interest	03-31-92	$33.26
Interest	06-30-92	32.47
Interest	09-30-92	14.10
Interest	12-31-92	18.30
Total Interest		$98.13

Dividends

Description	Date	Amount
Abbott Labs	02-18-92	$25.00
Abbott Labs	05-15-92	30.00
Abbott Labs	08-17-92	30.50
Abbott Labs	11-16-92	30.00
Automatic Data Proc.	01-02-92	8.00
Automatic Data Proc.	04-01-92	8.00
Automatic Data Proc.	07-01-92	9.20
Automatic Data Proc.	10-01-92	9.20
Borden	03-02-92	42.75
Borden	06-01-92	45.00
Borden	09-01-92	45.00
Borden	12-01-92	45.00
Coca-Cola	04-01-92	14.00
Coca-Cola	07-01-92	28.00
Coca-Cola	10-01-92	35.00
Coca-Cola	12-15-92	35.00
Dollar General	03-13-92	1.25
Dollar General	06-12-92	1.55
Dollar General	09-11-92	12.50
Dollar General	12-15-92	12.50
General Electric	01-27-92	24.75
General Electric	04-27-92	24.75
General Electric	07-27-92	24.75
General Electric	10-26-92	26.55
Genuine Parts	01-02-92	18.12
Genuine Parts	04-01-92	18.75
Genuine Parts	07-01-92	18.75
Genuine Parts	10-01-92	18.75
GSP-Gov't	01-27-92	0.53
GSP-Gov't	02-19-92	2.69
GSP-Gov't	03-17-92	5.88
GSP-Gov't	04-16-92	5.86
GSP-Gov't	05-18-92	5.73
GSP-Gov't	06-16-92	5.82
GSP-Gov't	07-16-92	5.57
GSP-Gov't	08-16-92	2.47

Professional Investment Associates (Cont'd)

Description	Date	Amount
GSP-Gov't	09-16-92	0.93
GSP-Gov't	10-16-92	2.01
GSP-Gov't	11-17-92	14.15
GSP-Gov't	12-31-92	5.37
Heinz. H.J.	01-10-92	10.80
Heinz. H.J.	04-10-92	10.80
Heinz. H.J.	07-10-92	10.80
Heinz. H.J.	10-12-92	12.00
Hong Kong Telecomm.	01-02-92	67.50
Hong Kong Telecomm.	08-18-92	79.40
Hong Kong Telecomm.	12-30-92	78.60
Int'l Flavors & Frag.	01-10-92	17.00
Int'l Flavors & Frag.	04-09-92	17.00
Int'l Flavors & Frag.	07-09-92	17.00
Int'l Flavors & Frag.	10-12-92	17.00
Johnson & Johnson	12-08-92	13.80
McDonalds	03-20-92	1.16
McDonalds	06-19-92	2.50
McDonalds	09-18-92	6.47
McDonalds	12-16-92	6.95
Mylan Labs	01-15-92	10.50
Mylan Labs	04-15-92	12.50
Mylan Labs	07-15-92	12.50
Mylan Labs	10-15-92	15.00
Philip Morris	01-10-92	65.62
Philip Morris	04-10-92	78.75
Philip Morris	07-10-92	105.00
Philip Morris	10-12-92	130.00
Proctor & Gamble	08-14-92	27.50
Proctor & Gamble	11-16-92	27.50
Synovus Financial	01-02-92	10.50
Synovus Financial	04-01-92	10.50
Synovus Financial	07-01-92	12.00
Synovus Financial	10-01-92	12.00
Syntex	03-11-92	23.00
Syntex	06-08-92	26.00
Syntex	09-14-92	26.00
Syntex	12-07-92	26.00
Vulcan Materials	03-10-92	15.00
Vulcan Materials	06-10-92	15.00
Vulcan Materials	09-10-92	15.00
Vulcan Materials	12-10-92	15.00
Waste Management	01-02-92	12.65
Waste Management	04-02-92	12.65
Waste Management	07-02-92	18.20
Waste Management	10-01-92	26.00
		$1,828.78

PROFESSIONAL INVESTMENT ASSOCIATES

Capital Gains and Losses
For Period from 01-01-92 to 12-31-92

Description	Date Acq	Date Sold	Sales Price	Cost	Gain (Loss)
SHORT TERM					
65 sh CPI Corp.	09-17-91	01-28-92	1,590.91	1,898.35	(307.44)
75 sh Dell Computer	09-17-91	01-28-92	2,348.71	2,498.66	(149.95)
.25 sh Dollar General	01-28-92	04-21-92	4.87	4.85	0.02
75 sh Buffets	05-21-91	05-19-92	2,056.89	1,594.85	462.04
150 sh Buffets	07-17-91	05-19-92	4,114.39	3,189.71	924.68
100 sh Sun-Off Stores	01-28-92	05-19-92	1,596.86	2,891.20	(1,294.34)
50 sh Sun-Off Stores	03-17-92	05-19-92	798.31	1,336.22	(537.91)
50 sh Bordens	05-19-92	11-17-92	1,306.49	1,574.46	(267.97)
Total Short Term Capital Gain (Loss)					($1,170.87)
LONG TERM					
75 sh Genuine Parts	09-18-90	09-22-92	2,188.57	1,931.58	256.99
200 sh Mylan Labs	07-17-90	10-05-92	4,698.74	2,281.23	2,417.51
50 sh Mylan Labs	09-18-90	10-05-92	1,174.69	504.77	669.92
100 sh Bordens	01-23-91	11-17-92	2,612.97	3,148.91	(535.94)
50 sh Syntex	05-21-91	11-17-92	1,243.59	2,155.44	(911.85)
50 sh Syntex	09-17-91	11-17-92	1,243.60	2,155.43	(911.83)
Total Long Term Capital Gain (Loss)					$984.80
					($186.07)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

(2)
HAND DELIVERED

MC (Office Use Only)

Robert C. Scott
(Full Name)

7501 River Road
(Mailing Address)

202-225-8351
Daytime Telephone

Newport News, VA 23607

Filer Status	[X] Member of the U.S. House of Representatives — State: Virginia District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [ ]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL [signature] **DATE (Month, Day, Year)** May 20, 1993

3542

Reporting Individual's Name
Robert C. Scott

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X							X
			George Wash. Credit Union Accounts			X									X					
			182 Main Street, Dover, Delaware				X							X						
	Colgate Palmolive Stock				X								X							
	AT + T Stock				X								X							

BLOCK C Income: Category of Amount of Income (X)										
	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
Examples: ABC Corporation Stock			X							
George Wash. Credit Union Accounts					X					
182 Main Street, Dover, Delaware				X						
Colgate Palmolive Stock		X								
AT + T Stock		X								

For additional assets and unearned income, use next page

Page ___ of ___

Schedule III

3543

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

MC (144)

HAND DELIVERED
(Office Use Only)

F. James Sensenbrenner, Jr.
(Full Name)

N76 W14726 North Point Drive, P.O. Box 186
(Mailing Address) Daytime Telephone

Menomonee Falls, Wisconsin 53052-0186

Filer Status	[x] Member of the U.S. House of Representatives	State: Wisconsin District: 9	[ ] Officer or Employee	Employing Office:
Report Type	[xx] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [x]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [x]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [x]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [x]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [x]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [x]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [x]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: F. James Sensenbrenner, Jr. DATE (Month, Day, Year): 5/12/93

3544

Reporting Individual's Name

F. James Sensenbrenner, J

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Sensenbrenner Family Trust (Trustee fee Dec. 8, 1992)	~~family~~	~~15,000~~

For payments to charity in lieu of honoraria, use Schedule II

Page 1 of ___

Schedule I

3545

Reporting Individual's Name

F. James Sensenbrenner, Jr.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
NONE				

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
F. JAMES SENSENBRENNER, JR

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–18.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									Block D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
	Bank One, Milwaukee, NA				X									X							X								
	~~Firstar Bank~~				~~X~~									~~X~~									~~X~~						
s	Bank One, Milwaukee, NA			X										X						X									
jt	Valley Bank, NA		X											X						X									
jt	Burke & Herbert Bank			X															X										
	FIS, Tr. 1976 Trust								X			X		X										X					
	Sandusky Voting Trust			X																X									
	NM McMurtrie Trust			X								X									X								
s	Firstar Bank			X																X									
	~~Abbott Laboratories stock~~					~~X~~						~~X~~																	
	Ameritech stock			X								X									X								

For additional assets and unearned income, use next page

35447

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)										Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Amoco Corp. Stock					X						X											X					
American Tel. & Tel. stock				X							X									X							
Bank One Corp. stock					X						X										X						
Bell Atlantic stock			X								X									X							
Dunn & Bradstreet stock						X					X											X					
E.I. DuPont stock				X							X									X							
Eastman Kodak stock					X						X										X						
Exxon Corp. stock						X					X												X				
Firstar Corp. stock				X							X									X							
General Electric stock					X						X										X						
General Motors stock				X							X									X							
General Mills Co. stock						X					X										X						
Halliburton Corp. stock				X							X									X							
IBM stock				X							X										X						
Kellogg Corp. stock					X						X										X						

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	Kimberly-Clark Corp. stock									x		x													x				x
	Merck & Co. Stock							x				x												x					
	Ogden Corp. stock				x							x										x							
	Minn. Min. & Mfg. Corp stock					x						x										x							
	Monsanto Corp. stock					x						x											x						
	Newell Corp. stock				x							x									x								
	NYNEX Inc. stock			x								x									x								
	Pacific Telesis stock			x								x									x								
S	Phillip Morris stock							x				x											x						
	Bell South Corp.			x								x									x								
	Seara Roebuck & Co. Stock			x								x									x								
	Southwest Bell stock			x								x									x								
	Tenneco Corp. Stock				x							x										x							x
	Unisys Corp. preferred stock			x								x								x									
x	Universal Foods Corp. stock				x							x										x							x

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) — None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.																												
	US West, Inc. stock			x								x									x								
	Warner Lambert Co. stock					x						x										x							
	Wisconsin Energy Corp. stock				x							x									x								
	OMI Corp. stock	x										x								x									
DC	Kimberly-Clark Corp. (in trust)						x					x												x					
DC	Bank One, Milwaukee CD (in trust)				x									x									x						
DC	Kimberly-Clark Corp. (in trust)						x					x												x					
DC	Burke & Herbert Bank (in trust)				x									x									x						
DC	Burke & Herbert Bank			x										x							x								
DC	Burke & Herbert Bank			x										x							x								
	Income, transactions, and holdings in trust of which F. James Sensenbrenner, Jr. is direct																												
	beneficiary is reported on separate accounting sheet by Bank One, Milwaukee Trust Co.																												
	Income, transactions, and holdings for which F. James Sensenbrenner, Jr. is trustee is																												
	reported on separate accounting sheets by Bank One, Milwaukee Trust Co.																												

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: F. James Sensenbrenner, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Income, holdings and transactions of which F. James Sensenbrenner, Jr. is co-trustee are reported on separate accounting sheets by Bank One, Milwaukee Trust Co.																												

Reporting Individual's Name

F. Jamea Sensenbrenner, Jr

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	See attached											
	Kimberly-Clark		x		8/14/92		x					

Schedule IV

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Reporting Individual's Name

F. James Sensenbrenner, Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Nationsbank Mortgage Corp.	Mortgage on Alexandria, VA residence.				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (=silver received from Committee on Standards)	$270
Milwaukee Brewers	American League Pass (not used)	nil

Use additional sheets if more space is required.

Reporting Individual's Name

F. James Sensenbrenner, Jr.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Hovnanian School	1/31-2/1	D.C.-Newark - D.C.	y	y	none	no
	Congressional Human Rights Foundation	2/10-2/17	DC-Vienna-Croatia-Vienna - DC	y	y	none	2
	Elliott School of Internatl Affairs - GW University	11/8-11/14	DC-Hong Kong-Japan-DC	y	y	none	2

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Page 11 of ___

Schedule VII

Reporting Individual's Name
F. James Sensenbrenner, Jr.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Sensenbrenner Family Trust
Co-Trustee	Seperate trusts established for the benefit of F. James Sensenbrenner, III and Robert Alan Sensenbrenner.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 25.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1982 [illegible]

70-599 O—93——26

F. JAMES SENSENBRENNER, JR.
NINTH DISTRICT, WISCONSIN

COMMITTEE ON THE JUDICIARY
COMMITTEE ON SCIENCE, SPACE, AND TECHNOLOGY
SELECT COMMITTEE ON NARCOTICS ABUSE AND CONTROL

Congress of the United States
House of Representatives
Washington, DC 20515-4909

WASHINGTON OFFICE:
ROOM 2332
RAYBURN HOUSE OFFICE B
WASHINGTON, DC 20515
202-225-5101

DISTRICT OFFICE:
120 BISHOPS WAY
BROOKFIELD, WI 53005
414-784-1111

OUTSIDE MILWAUKEE & CALLING AREA
1-800-242-111

MR. SENSENBRENNER. Mr. Speaker, through the following statement, I am making my financial net worth as of March 31, 1993, a matter of public record. I have filed similar statements for each of the fourteen preceding years I have served in the Congress.

ASSETS

REAL PROPERTY

Single family residence at 609 Ft. Williams Parkway, City of Alexandria, Virginia, at assessed valuation. (Assessed at $629,500.00). Ratio of assessed to market value: 100% (Encumbered)	$629,500.00
Condominium at N76 W14726 North Point Drive, Village of Menomonee Falls, Waukesha County, Wisconsin, at assessor's estimated market value. (Unencumbered)	82,500.00
Undivided 25/44ths interest in single family residence at N52 W32654 Maple Lane, Village of Chenequa, Waukesha County, Wisconsin, at 25/44ths of assessor's estimated market value of $303,900.	172,670.45
TOTAL REAL PROPERTY	$884,670.45

1993 disclosure

Common & Preferred Stock	# of shares	$ per share	Value
Firstar Corp.	676	33.88	22,899.50
American Telephone & Telegraph	497.395	56.75	28,227.17
American Information Technologies	163.391	76.88	12,560.68
Bell Atlantic Corp.	214.774	56.00	12,027.34
Bell South Corp.	243.888	56.63	13,810.16
NYNEX , Inc.	112.721	92.13	10,384.42
Pacific Telesis, Inc.	148	48.75	7,215.00
Southwest Bell, Inc.	166.32	78.13	12,993.75
U.S. West, Inc.	223.06	43.63	9,730.99
Tenneco Corp.	712.423	45.88	32,682.41
Newell Corp.	838	39.00	32,682.00
General Mills, Inc.	1440	70.88	102,060.00
Kellogg Corp.	1600	60.50	96,800.00
Dunn & Bradstreet, Inc.	2000	59.00	118,000.00
Halliburton Company	1000	36.25	36,250.00
Kimberly-Clark Corp.	32944	54.75	1,803,684.00
Minnesota Mining & Manufacturing	500	109.50	54,750.00
Exxon Corp.	2132	66.13	140,978.50
Amoco Corp.	1162	57.50	66,815.00
Eastman Kodak	1080	54.25	58,590.00
General Electric Co.	1075	89.13	95,809.38
General Motors Corp.	408	37.63	15,351.00
Merck & Co., Inc.	15639	35.38	553,229.63
Warner Lambert Co.	952	70.13	66,759.00
Sears Roebuck & Co.	200	54.75	10,950.00
Ogden Corp.	910	24.63	22,408.75
International Business Machines, Inc.	418	50.75	21,213.50
Sandusky Voting Trust	26	105.00	2,730.00
Monsanto Corporation	1422	49.75	70,744.50
E.I. DuPont de Nemours Corp.	450	48.25	21,712.50
Wisconsin Energy Corp.	767	27.75	21,284.25
Abbott Laboratories, Inc.	3600	25.75	92,700.00
Bank One Corp.	1551	57.75	89,570.25
Unisys, Inc. Preferred	100	46.13	4,612.50
Benton County Mining Company	333	0.00	0.00
TOTAL COMMON & PREFERRED STOCKS			$3,762,216.17

1993 disclosure

Life Insurance Policies	Face $	Surrender $
Northwestern Mutual #4378000	12,000.00	24,573.91
Northwestern Mutual #4574061	30,000.00	58,780.15
Massachusetts Mutual #4116575	10,000.00	5,120.99
Massachusetts Mutual #4228344	100,000.00	103,780.00
Old Line Life Ins. #5-1607059L	175,000.00	19,436.43
TOTAL LIFE INSURANCE POLICIES		$211,701.48

1993 disclosure

BANK & SAVINGS & LOAN ACCOUNTS	ACCOUNT #	BALANCE
Bank One, Milwaukee, N.A., checking account	0046-2366	2,041.62
Bank One, Milwaukee, N.A., preferred savings	4158-8070	35,365.66
Bank One, Milwaukee, N.A., regular savings	497-525	692.69
Valley Bank, N.A., Hartland, WI, checking account	03056664-06	472.41
Valley Bank, N.A., Hartland, WI, savings	03056544-11	576.43
Burke & Herbert Bank, Alexandria, VA, checking account	601-301-5	1,255.82
Firstar, FSB, Butler, WI, IRA accounts		41,250.72
TOTAL BANK & SAVINGS & LOAN ACCOUNTS		$81,655.35

1993 disclosure

MISCELLANEOUS	VALUE
1985 Pontiac 6000 automobile - blue book retail value	$2,300.00
1991 Buick Century automobile - blue book retail value	$9,650.00
Office furniture & equipment (estimated)	$1,000.00
Furniture, clothing & personal property (estimated)	$125,000.00
Stamp collection (estimated)	$34,000.00
Interest in Wisconsin retirement fund	$45,669.35
Deposits in Congressional Retirement Fund	$75,897.05
Deposits in Federal Thrift Savings Plan	$40,216.89
Traveller's checks	$6,350.00
20 ft. Manitou pontoon boat & 35 hp Force outboard motor (estimated)	$5,000.00
TOTAL MISCELLANEOUS	$345,083.29
TOTAL ASSETS	$5,285,326.74

1993 disclosure

LIABILITIES

Nations Bank Mortgage Company , Louisville, KY on Alexandria, VA residence Loan #330865-1	$172,713.15
Miscellaneous charge accounts (estimated)	$2,000.00
TOTAL LIABILITIES	$174,713.15
NET WORTH	$5,110,613.59

STATEMENT OF 1992 TAXES PAID

Federal income tax	$62,581.00
Wisconsin income tax	$17,903.00
Menomonee Falls, WI property tax	$2,188.00
Chenequa , WI property tax	$8,753.00
Alexandria, VA property tax	$6,543.00

I further declare that I am trustee of a trust established under the will of my late father, Frank James Sensenbrenner, Sr., for the benefit of my sister, Margaret A. Sensenbrenner, and of my two sons, F. James Sensenbrenner, III, and Robert Alan Sensenbrenner. I am further the direct beneficiary of two trusts, but have no control over the assets of either trust. My wife, Cheryl Warren Sensenbrenner, and I are trustees of separate trusts established for the benefit of each son under the Uniform Gifts to Minors Act. Also, I am neither an officer nor a director of any corporation organized under the laws of the State of Wisconsin or of any other state or foreign country.

F. JAMES SENSENBRENNER, JR.,
Member of Congress

FORBES [illegible] SENSENBRENNER TR
ACCOUNT NUMBER [illegible]
STATEMENT
FOR THE PERIOD [illegible] 31 91 TO 12 31 92

BANK ONE WISCONSIN TRUST CO N.A.
111 E WISCONSIN AVE
MILWAUKEE, WI 53202

ADMINISTRATOR:
[illegible]

F JAMES SENSENBRENNER JR
597 FORT WILLIAMS TRAY
ALEXANDRIA VA 22314 1813

TRANSACTION SUMMARY

VINCENT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 110410430000

	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
BEGINNING BALANCES 12/31/91	1,751.01	1,751.01-	48,176.19
CASH RECEIPTS			
NET INTEREST	155.14		
NET DIVIDENDS	1,832.11	539.58	
OTHER CASH RECEIPTS	134.51	7,523.73	
TOTAL CASH RECEIPTS	2,121.76	8,063.31	0.00
CASH DISBURSEMENTS			
FIDUCIARY INCOME TAXES		1,172.00-	
ADMINISTRATIVE EXPENSES	1,349.04-		
OTHER DISBURSEMENTS	2,523.73-		
TOTAL CASH DISBURSEMENTS	3,872.77-	1,172.00-	0.00
INVESTMENT TRANSACTIONS			
PURCHASES		7,000.00-	7,000.00
ADJUSTMENTS TO FEDERAL BASIS			1,259.41
NET PURCHASES/SALES CAPITAL GAIN DISTRIBUTIONS		1,859.70	1,859.70-
TOTAL INVESTMENT TRANSACTIONS		5,140.30-	6,799.71
ENDING BALANCES 12/31/92	0.00	0.00	54,975.90

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 110415-43000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/31/91	BEGINNING BALANCES	1,751.01	1,751.01-	48,176.19
01/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 12/1/91 TO 12/31/91	27.62		
01/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	2.48-		
[illegible]	PURCHASED 25.14 UNITS HELMSMAN PRIME FUND TRADE DATE [illegible]		25.14-	25.14
[illegible]	INCOME ON HELMSMAN DISCIPLINED EQUITY @ 0.02600/UNITS ON [illegible]	4.9[illegible]		
[illegible]	INCOME ON HELMSMAN GROWTH EQUITY @ 0.01900/UNITS ON 317.55 UNITS ON [illegible]	6.61		
[illegible]	INCOME ON HELMSMAN TRIGGER EQUITY @ 0.01[illegible]/UNITS ON [illegible]	8.22		
[illegible]	INCOME ON HELMSMAN INCOME [illegible] [illegible]	13.[illegible]		

3565

TRANSACTION DETAIL

[illegible] HEAD SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER [illegible]

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible] 03/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.06300/UNITS ON 701.27 UNITS DUE 1/ 2 92	44.18		
01/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.04084/UNITS ON 496.00 UNITS DUE 12/31/91	20.26		
01 03.92	FED BASIS ADJUSTED BY $1.7 25 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY [illegible]			139.26
1 03/92	INCOME ON INCOME STOCK FUND $ 0.08777/UNITS ON 532.00 UNITS DUE 12/31/91	46.69		
01/06/92	PURCHASED 144.8 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 6/92		144.80-	144.80
01/07/92	TRUSTEE FEE BALANCE DUE ON 6/1/91 TRUSTEE'S FEE	377.08-		
01/08/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 1 91	2.36		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
1/08/92	SOLD 374.72 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 8/92		374.72	374.72-
1/09/92	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	1,751.01-		
1/09/92	CASH RECEIPT TRANSFER FROM INCOME		1,751.01	
1/21/92	PURCHASED 307.692 UNITS HELMSMAN GROWTH EQUITY TRADE DATE 1/21/92 307.692 UNITS AT [illegible]		5,000.00-	5,000.00
1/21/92	SOLD 5,000 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/21/92		5,000.00	5,000.00
[illegible]	INCOME HELMSMAN PRIME FUND INTEREST FROM 1/1/92 TO 1/31/92	20.43		
[illegible]/1/92	AUTOMATED CASH MANAGEMENT [illegible] HELMSMAN PRIME FUND [illegible]	1.82-		
	[illegible]		18.61	18.61

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER JR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 110415436-00

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.00400/UNITS ON 190.66 UNITS DUE 2/ 3/92	0.76		
02/04/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00500/UNITS ON 655.64 UNITS DUE 2/ 3/92	3.28		
02/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.00900/UNITS ON 178.73 UNITS DUE 2/ 3/92	1.61		
02/04/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.06000/UNITS ON 210.31 UNITS DUE 2/ 3/92	12.62		
02/04/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05600/UNITS ON 701.27 UNITS DUE 2/ 3/92	39.27		
02/04/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.02791/UNITS ON 496.00 UNITS DUE 2/ 1/92	13.84		
02/04/92	INCOME ON INCOME STOCK FUND $ 0.04628/UNITS ON 532.00 UNITS DUE 1/31/92	24.62		

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ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]/05/92	PURCHASED 96 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 5/92		96.00-	96.00
[illegible]/10/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.38		
10/92	CASH RECEIPT HELMSMAN DISCIPLINED EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.16		
[illegible]	CASH RECEIPT HELMSMAN GROWTH EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	3.95		
10/92	CASH RECEIPT HELMSMAN INCOME PORTFOLIO ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	0.73		
[illegible] 10/92	CASH RECEIPT HELMSMAN INCOME EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.21		

3569

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 110-1542000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]/10/92	CASH RECEIPT HELMSMAN LTD VOLATILITY BD ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	2.55		
[illegible]/11/92	PURCHASED 10.98 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/11/92		10.98-	10.98
[illegible]/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 2/1 [illegible] TO [illegible]	7.11		
[illegible]/02/92	AUTOMATED CASH MANAGEMENT [illegible] HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.58		
03/03/92	PURCHASED 6.53 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 3/92		6.53-	6.53
03/03/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.05000/UNITS ON 190.66 UNITS DUE 3/ 2/92	9.53		
[illegible]/03/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.06700/UNITS ON 178.73 UNITS DUE 3/ 2/92	11.98		
[illegible]/92	INCOME ON HELMSMAN INCOME FORTIFIED $ 0.05500/UNITS ON [illegible]	11.57		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]/03/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05300/UNITS ON 701.27 UNITS DUE 3/ 2/92	37.17		
[illegible]/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.13319/UNITS ON 496.00 UNITS DUE [illegible]	66.06		
[illegible]	FED BASIS ADJUSTED BY $27.74 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY [illegible]			27.74
[illegible]	INCOME ON INCOME STOCK FUND $ 0.15255/UNITS ON [illegible] UNITS DUE [illegible]	81.16		
[illegible]	FED BASIS ADJUSTED BY $217.58 INCOME STOCK FUND STATE COST ADJUSTED BY $217.58			217.58
[illegible]/04/92	PURCHASED 217.47 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 4/92		217.47-	217.47
[illegible]	PURCHASED 11.29 DOLLARS HELMSMAN PRIME FUND TRADE DATE [illegible]		11.29-	11.29
[illegible]		[illegible]		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER JR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 1104154300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.90-		
04/02/92	PURCHASED 7.14 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 2/92		7.14-	7.14
04/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01900/UNITS ON 190.35 UNITS DUE 4/ 1/92	3.62		
04/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00200/UNITS ON 655.64 UNITS DUE 4/ 1/92	1.31		
04/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.03100/UNITS ON 178.73 UNITS DUE 4/ 1/92	5.54		
04/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.06000/UNITS ON 210.31 UNITS DUE 4/ 1/92	12.62		
04/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05600/UNITS ON 701.27 UNITS DUE 4/ 1/92	39.27		
[illegible]	INCOME ON DISCIPLINED EQUITY FUND $ [illegible]/UNITS ON [illegible] UNITS DUE [illegible]	30.00		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/02/92	FED BASIS ADJUSTED BY $57.53 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $57.53			57.53
04/02/92	INCOME ON INCOME STOCK FUND @ 0.09448/UNITS ON 532.00 UNITS DUE 3/31/92	50.26		
[illegible]	PURCHASED 143.22 DOLLARS DREYFUS PRIME FUND TRADE DATE [illegible]		143.22-	143.22
[illegible]	PURCHASED 11.92 DOLLARS DREYFUS PRIME FUND TRADE DATE [illegible]		11.92-	11.92
[illegible]	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY INC TAX TAX DUE ON FORM 1041 FOR CALENDAR YEAR RETURN		488.00-	
[illegible]	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY INC TAX TAX DUE ON FORM 2 FOR CALENDAR YEAR RETURN		94.00-	
[illegible]	SOLD 582 DOLLARS DREYFUS PRIME FUND TRADE DATE [illegible]		582.00	582.00

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR | 12/31/91 THROUGH 12/31/92 | ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/13/92	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY EST INC TAX INSTALLMENT ON WIS FIDUCIARY INC TAX		100.00-	
04/13/92	SOLD 100 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/13/92		100.00	100.00-
04/13/92	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY EST INC TAX		490.00-	
04/14/92	SOLD 490 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/14/92		490.00	490.00-
04/28/92	CASH RECEIPT PAID FROM ACCOUNT# 11041768400 ADDITIONS TO ACCOUNT ANNUAL CONTRIBUTION		5,000.00	
04/29/92	PURCHASED 5,000 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/29/92		5,000.00-	5,000.00
05/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 4/1/92 TO 4/30/92	6.81		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.79-		
[illegible]/04/92	PURCHASED 6.02 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 4/92		6.02-	6.02
[illegible]/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.61100/UNITS ON [illegible] UNITS [illegible]	2.10		
[illegible]/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.01100/UNITS ON [illegible] UNITS [illegible]	1.92		
[illegible]/04/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05500/UNITS ON 210.51 UNITS DUE 5/ 1/92	11.57		
[illegible]/04/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05100/UNITS ON 701.27 UNITS DUE 5/ 1/92	35.76		
[illegible]/04/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.05450/UNITS ON [illegible] UNITS [illegible]	27.12		
[illegible]	FED BASIS ADJUSTED [illegible] DISCIPLINED EQUITY [illegible] [illegible] ADJUSTED [illegible]			21.91-

ROBERT ALAN SENSENBRENNER JR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/01/92	INCOME ON INCOME STOCK FUND $ 0.03641/UNITS ON 532.00 UNITS DUE 4/30/92	19.37		
05/04/92	FED BASIS ADJUSTED BY $10.37 INCOME STOCK FUND STATE COST ADJUSTED BY $10.37			10.37
05/05/92	PURCHASED 97.89 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 5.92		97.89-	97.89
05/06/92	PURCHASED 128.123 UNITS HELMSMAN GROWTH EQUITY TRADE DATE 5/ 5/92 128.123 UNITS AT $15.61		2,000.00-	2,000.00
05/06/92	SOLD 1,988.83 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 6/92		1,988.83	1,988.83-
05/18/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11010999099 FID INC TAX PREPARATION FEE TO BANK ONE WIS TRUST COMPANY	205.00-		
05/18/92	SOLD 205 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/18/92		205.00	205.00-

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ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 5/1/92 TO 5/31/92	14.62		
06/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.65-		
[illegible]	PURCHASED 12.97 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 2/92		12.97-	12.97
[illegible]	INCOME ON HELMSMAN DISCIPLINED EQUIT. @ 0.05000/UNITS ON 190.65 UNITS DUE 6/ 1/92	9.53		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY @ 0.07000/UNITS ON 178.73 UNITS DUE 6/ 1/92	12.51		
[illegible]	INCOME ON HELMSMAN INCOME PORTFOLIO @ 0.05500/UNITS ON 210.31 UNITS DUE 6/ 1/92	11.57		
[illegible]	INCOME ON HELMSMAN [illegible] @ [illegible]	[illegible]		
	INCOME ON [illegible] [illegible]	[illegible]		

3577

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/02/92	FED BASIS ADJUSTED BY $120.60 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $120.60			120.60
06/02/92	INCOME ON INCOME STOCK FUND $ 0.15670/UNITS ON 532.00 UNITS DUE 5/31/92	83.37		
06/03/92	PURCHASED 220.72 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 3/92		220.72-	220.72
06/04/92	PURCHASED 14.83 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 4/92		14.83-	14.83
06/08/92	PURCHASED 6.36 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 8/92		6.36-	6.36
06/09/92	SOLD 7.95 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 9/92		7.95	7.95-
06/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 6/23/92	750.00-		
06/24/92	SOLD 750 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/24/92		750.00	750.00-

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 6/1/92 TO 6/30/92	12.82		
07/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.43-		
[illegible]	PURCHASED 11.37 DOLLARS HELMSMAN PRIME FUND TRADE DATE [illegible]		11.39-	11.39
[illegible]	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01500/UNITS ON 190.66 UNITS DUE [illegible]	2.86		
[illegible]	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00100/UNITS ON 783.76 UNITS DUE [illegible]	0.78		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY $ 0.03500/UNITS ON 178.73 UNITS DUE [illegible]	6.26		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY $ [illegible] UNITS ON [illegible] UNITS DUE [illegible]	11.78		
[illegible]	INCOME ON [illegible]	37.07		

TRANSACTION DETAIL

LUBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.05878/UNITS ON 496.00 UNITS DUE 6/30/92	29.16		
07/02/92	FED BASIS ADJUSTED BY $209.24 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $209.24			209.24
07/02/92	INCOME ON INCOME STOCK FUND $ 0.10451/UNITS ON 532.00 UNITS DUE [illegible]	55.60		
[illegible]/02/92	FED BASIS ADJUSTED BY $1[illegible].44 INCOME STOCK FUND STATE COST ADJUSTED BY $162.44			162.44
07/06/92	PURCHASED 156.91 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 6/92		156.91-	156.91
08/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.04725/UNITS ON 496.00 UNITS DUE 7/31/92	23.44		
08/03/92	INCOME ON INCOME STOCK FUND $ 0.03890/UNITS ON 532.00 UNITS DUE 7/31/92	20.70		
[illegible]/03/92	FED BASIS ADJUSTED BY $12.06 INCOME STOCK FUND STATE COST ADJUSTED BY $1[illegible]			12.06

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05600/UNITS ON 210.31 UNITS DUE 9/ 1/92	11.78		
09/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05400/UNITS ON 701.27 UNITS DUE 9/ 1/92	37.87		
[illegible] 02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.12083/UNITS ON 4[illegible] 00 UNITS DUE [illegible]	59.93		
[illegible] 02/92	INCOME ON INCOME STOCK FUND $ 0.18268/UNITS ON 5[illegible] UNITS DUE [illegible]	86.55		
[illegible] 92	PURCHASED 218.16 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 3/92		218.16-	218.16
[illegible] 06/92	PURCHASED 13.17 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 4/92		13.17-	13.17
[illegible] 92	RECEIVED A [illegible] CAPITAL GAINS DISTRIBUTION HELMSMAN GROWTH EQUITY		6.27	
[illegible]	[illegible] [illegible] FUND [illegible]		6.27-	6.27

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 7/1/92 TO 7/31/92	11.57		
08/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.24-		
[illegible]/92	PURCHASED 54.47 DOLLARS HELMSMAN PRIME FUND TRADE DATE [illegible]/4/92		54.47-	54.47
[illegible]/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01000/UNITS ON 196.[illegible] UNITS DUE [illegible]	1.91		
[illegible]/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00100/UNITS ON 783.76 UNITS DUE [illegible]/3/92	0.78		
[illegible]/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.00500/UNITS ON 178.73 UNITS DUE [illegible]/3/92	0.89		
[illegible]/04/92	INCOME ON HELMSMAN INCOME FORTFOLIO $ 0.05[illegible] UNITS ON [illegible]	11.99		
[illegible]	[illegible]	37.87		

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/05/92	PURCHASED 53.44 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 5/92		53.44-	53.44
08/06/92	PURCHASED 13 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 6/92		13.00-	13.00
09/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 8/1/92 TO 8/31/92	11.33		
09/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.52-		
09/02/92	PURCHASED 9.81 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 2/92		9.81-	9.81
09/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.03500/UNITS ON 190.66 UNITS DUE 9/ 1/92	6.67		
09/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00500/UNITS ON 783.76 UNITS DUE 9/ 1/92	3.92		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY $ 0.06400/UNITS ON 173.73 UNITS DUE 9/ 1/92	11.44		

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 9/1/92 TO 9/30/92	11.00		
10/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.50-		
10/02/92	PURCHASED 9.5 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 2/92		9.50-	9.50
10/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.02400/UNITS ON 190.66 UNITS DUE 10/ 1/92	4.58		
10/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00800/UNITS ON 783.76 UNITS DUE 10/ 1/92	6.27		
10/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.03700/UNITS ON 178.73 UNITS DUE 10/ 1/92	6.61		
10/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05700/UNITS ON 210.31 UNITS DUE 10/ 1/92	11.99		
10/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05400/UNITS ON 701.27 UNITS DUE 10/ 1/92	37.87		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.05769/UNITS ON 496.00 UNITS DUE 9/30/92	28.62		
10/02/92	FED BASIS ADJUSTED BY $268.27 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $268.27			268.27
10/02/92	INCOME ON INCOME STOCK FUND $ 0.08601/UNITS ON 532.00 UNITS DUE [illegible]	45.76		
10/02/92	FED BASIS ADJUSTED BY [illegible] INCOME STOCK FUND STATE COST ADJUSTED BY [illegible]			63.68
10/05/92	PURCHASED 141.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 5/92		141.70-	141.70
10/08/92	PURCHASED 12.77 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 8/92		12.77-	12.77
11/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 10/1/92 TO 10/31/92	11.96		
[illegible]	AUTOMATED CASH MANAGEMENT [illegible] HELMSMAN PRIME FUND CASH NOT ENG. HELMSMAN PRIME FUND	1.95-		

ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
11/03/92	PURCHASED 10.41 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 3/92		10.41-	10.41
11/03/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01100/UNITS ON 190.66 UNITS DUE 11/ 2/92	2.10		
11/03/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00300/UNITS ON [illegible] UNITS DUE 11/ 2/92	2.35		
11/03/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.00500/UNITS ON 178.73 UNITS DUE 11/ 2/92	0.89		
11/03/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05800/UNITS ON 210.31 UNITS DUE 11/ 2/92	12.20		
11/03/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05200/UNITS ON 701.27 UNITS DUE 11/ 2/92	36.47		
11/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.04259/UNITS ON 496.00 UNITS DUE 10/31/92	21.12		
[illegible]	FED BASIS ADJUSTED BY [illegible] DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY [illegible]			226.74

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ROBERT ALAN SENSENBRENNER TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
11/03/92	INCOME ON INCOME STOCK FUND $ 0.03463/UNITS ON 532.00 UNITS DUE 10/31/92	18.42		
11/04/92	PURCHASED 93.55 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 4/92		93.55-	93.55
11/05/92	PURCHASED 10.91 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 5/92		10.91-	10.91
[illegible]	INCOME HELMSMAN PRIME FUND INTEREST FROM 11/[illegible] TO 11/30/92	11.83		
[illegible]/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.50-		
[illegible]/02/92	PURCHASED 10.33 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 2/92		10.33-	10.33
[illegible]	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.04100/UNITS ON [illegible]	7.82		
[illegible]	INCOME ON HELMSMAN DISCIPLINED EQUITY $ [illegible]/UNITS ON [illegible]	3.14		

TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.05900/UNITS ON 178.73 UNITS DUE 12/ 1/92	10.55		
12/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05200/UNITS ON 210.31 UNITS DUE 12/ 1/92	10.94		
12/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.04900/UNITS ON 701.27 UNITS DUE 12/ 1/92	34.36		
12/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.12879/UNITS ON 496.00 UNITS DUE 11/30/92	63.88		
12/02/92	FED BASIS ADJUSTED BY $219.29 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $219.29			219.29
12/02/92	INCOME ON INCOME STOCK FUND $ 0.16169/UNITS ON 532.00 UNITS DUE 11/30/92	86.02		
12/03/92	PURCHASED 216.71 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 3/92		216.71-	216.71

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/04/92	PURCHASED 11.1 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 4/92		11.10-	11.10
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN GROWTH EQUITY		440.47	
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN INCOME PORTFOLIO		23.13	
12/29/92	RECEIVED A ST CAPITAL GAINS DISTRIBUTION HELMSMAN INCOME PORTFOLIO		3.79	
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN LTD VOLATILITY BD		36.47	
12/29/92	RECEIVED A ST CAPITAL GAINS DISTRIBUTION HELMSMAN LTD VOLATILITY BD		29.45	
12/30/92	PURCHASED 533.31 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/30/92		533.31-	533.31
12/31/92	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	772.72-		
[illegible]	CASH RECEIPT TRANSFER FROM INCOME		772.72	
[illegible]	[illegible]	121.17		

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TRANSACTION DETAIL

ROBERT ALAN SENSENBRENNER TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041543000

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
	12/31/91 TO 12/31/92			
12/31/92	ENDING BALANCES	0.00	0.00	54,975.90

INCOME CASH	+	PRINCIPAL CASH	=	NET CASH
0.00		0.00		0.00

INVESTMENT REVIEW

ROBERT ALAN SENSENBRENNER TR

SUMMARY OF ASSETS AS OF 12/31/92

ACCOUNT NUMBER: 1104154300

DESCRIPTION	TAX COST	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	YIELD AT MARKET
CASH EQUIVALENTS	5,458.40	5,458.40	9.03	174.12	3.19
MUTUAL FUNDS - FIXED INCOME	9,117.86	9,610.11	15.89	596.31	6.21
COMMON & MUTUAL FUNDS - EQUITIES	40,399.64	45,411.73	75.09	1,214.24	2.67
TOTAL ACCOUNT	54,975.90	60,480.24	100.00	1,984.67	3.28

INVESTMENT REVIEW

PAGE

ROBERT ALAN SENSENBRENNER TR — DETAIL OF ASSETS AS OF 12/31/92 — ACCOUNT NUMBER: 1104154300

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MKT
CASH							
0.00	INCOME CASH	0.00		0.00	0.00		
0.00	PRINCIPAL CASH	0.00		0.00	0.00		
0.00	NET CASH	0.00		0.00	0.00		
CASH EQUIVALENTS							
5,458.4	HELMSMAN PRIME MONEY MARKET PORT	5,458.40	1.00	5,458.40	9.03	174.12	3.19
MUTUAL FUNDS - FIXED INCOME							
210.31	HELMSMAN INCOME PORTFOLIO	2,000.00	10.15	2,134.60	3.53	144.69	6.78
701.27	HELMSMAN LTD VOLATILITY BD	7,117.86	10.66	7,475.51	12.36	451.62	6.04
TOTAL MUTUAL FUNDS - FIXED INCOME		9,117.86		9,610.11	15.89	596.31	6.21
COMMON & MUTUAL FUNDS - EQUITIES							
496	DISCIPLINED EQUITY FUND	11,794.56	28.16	13,968.85	23.10	447.00	3.20
170.66	HELMSMAN DISCIPLINED VALUE PORTFOLIO	2,000.00	12.29	2,343.19	3.87	56.05	2.39
783.76	HELMSMAN GROWTH EQUITY	12,000.00	16.21	12,704.78	21.01	28.22	0.22

INVESTMENT REVIEW

ROBERT ALAN SENSENBRENNER TR

DETAIL OF ASSETS AS OF 12/31/92

ACCOUNT NUMBER: 1104154300

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MAT
178.73	HELMSMAN INCOME EQUITY	2,000.00	12.75	2,278.82	3.77	75.96	3.3
532	INCOME STOCK FUND	12,605.08	26.53	14,116.09	23.34	607.01	4.30
TOTAL COMMON & MUTUAL FUNDS - EQUITIES		40,399.64		45,411.73	75.09	1,214.24	2.67
TOTAL ACCOUNT		54,975.90		60,480.24	100.00	1,984.67	3.28

INVESTMENT REVIEW

ROBERT ALAN SENSENBRENNER TR DETAIL OF PENDING ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 1104154300

PENDING TRADES: NONE

F JAMES SENSENBRENNER III TR
ACCOUNT NUMBER 11041542300
STATEMENT
FOR THE PERIOD 12/31/91 TO 12/31/92

BANK ONE WISCONSIN TRUST CO NA
111 E WISCONSIN AVE
MILWAUKEE, WI 53202

ADMINISTRATOR:
LYNN E PAULL 414-765-2751

INVESTMENT MANAGER:
DOUGLAS O KLOPPENBURG 414-765-3342

F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

TRANSACTION SUMMARY

F JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
BEGINNING BALANCES 12/31/91	1,274.74	1,274.74-	46,731.92
CASH RECEIPTS			
NET INTEREST	116.51		
NET DIVIDENDS	1,832.11	539.58	
OTHER CASH RECEIPTS	131.39	7,386.82	
TOTAL CASH RECEIPTS	2,080.01	7,926.40	0.00
CASH DISBURSEMENTS			
FIDUCIARY INCOME TAXES		1,034.00-	
ADMINISTRATIVE EXPENSES	967.93-		
OTHER DISBURSEMENTS	2,386.82-		
TOTAL CASH DISBURSEMENTS	3,354.75-	1,034.00-	0.00
INVESTMENT TRANSACTIONS			
PURCHASES		7,000.00-	7,000.00
ADJUSTMENTS TO FEDERAL BASIS			1,659.41
NET PURCHASES/SALES CASH MANAGEMENT VEHICLE		1,382.34	1,382.34-
TOTAL INVESTMENT TRANSACTIONS		5,617.66-	7,277.07
ENDING BALANCES 12/31/92	0.00	0.00	54,008.99

TRANSACTION DETAIL

E JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/31/91	BEGINNING BALANCES	1,274.74	1,274.74-	46,731.92
01/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 12/1/91 TO 12/31/91	21.88		
01/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.86-		
01/03/92	PURCHASED 20.02 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 3/92		20.02-	20.02
01/03/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.02600/UNITS ON 190.66 UNITS DUE 1/ 2/92	4.96		
01/03/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.01900/UNITS ON 347.95 UNITS DUE 1/ 2/92	6.61		
01/03/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.04600/UNITS ON 178.73 UNITS DUE 1/ 2/92	8.22		
01/03/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.06600/UNITS ON 210.31 UNITS DUE 1/ 2/92	13.88		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/03/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.06300/UNITS ON 701.27 UNITS DUE 1/ 2/92	44.18		
01/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.04084/UNITS ON 496.00 UNITS DUE 12/31/91	20.26		
01/03/92	FED BASIS ADJUSTED BY $139.26 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $139.26			139.26
01/03/92	INCOME ON INCOME STOCK FUND $ 0.08777/UNITS ON 532.00 UNITS DUE 12/31/91	46.69		
01/06/92	PURCHASED 144.8 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 6/92		144.80-	144.80
01/08/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 12/91	1.87		
01/08/92	PURCHASED 1.87 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 8/92		1.87-	1.87

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/09/92	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	1,274.74-		
01/09/92	CASH RECEIPT TRANSFER FROM INCOME		1,274.74	
01/21/92	PURCHASED 307.692 UNITS HELMSMAN GROWTH EQUITY TRADE DATE 1/17/92 307.692 UNITS AT $16.25		5,000.00-	5,000.00
01/21/92	SOLD 5,000 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/21/92		5,000.00	5,000.00-
02/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 1/1/92 TO 1/31/92	16.07		
02/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.46-		
02/04/92	PURCHASED 14.61 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 4/92		14.61-	14.61
02/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY @ 0.00400/UNITS ON 190.66 UNITS DUE 2/ 3/92	0.76		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/04/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00500/UNITS ON 655.64 UNITS DUE 2/ 3/92	3.28		
02/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.00900/UNITS ON 178.73 UNITS DUE 2/ 3/92	1.61		
02/04/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.06000/UNITS ON 210.31 UNITS DUE 2/ 3/92	12.62		
02/04/92	INCOME ON HELMSMAN LTD VOLATILITY 80 $ 0.05600/UNITS ON 701.27 UNITS DUE 2/ 3/92	39.27		
02/04/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.02791/UNITS ON 496.00 UNITS DUE 2/ 1/92	13.84		
02/04/92	INCOME ON INCOME STOCK FUND $ 0.04628/UNITS ON 532.00 UNITS DUE 1/31/92	24.62		
02/05/92	PURCHASED 96 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 5/92		96.00-	96.00

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/10/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.08		
02/10/92	CASH RECEIPT HELMSMAN DISCIPLINED EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.16		
02/10/92	CASH RECEIPT HELMSMAN GROWTH EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	3.95		
02/10/92	CASH RECEIPT HELMSMAN INCOME PORTFOLIO ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	0.73		
02/10/92	CASH RECEIPT HELMSMAN INCOME EQUITY ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	1.21		
02/10/92	CASH RECEIPT HELMSMAN LTD VOLATILITY BD ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	2.55		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/11/92	PURCHASED 10.68 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/11/92		10.68-	10.68
03/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 2/1/92 TO 2/29/92	3.73		
03/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.29-		
03/03/92	PURCHASED 3.44 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 3/92		3.44-	3.44
03/03/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.05000/UNITS ON 190.66 UNITS DUE 3/ 2/92	9.53		
03/03/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.06700/UNITS ON 178.73 UNITS DUE 3/ 2/92	11.98		
03/03/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05500/UNITS ON 210.31 UNITS DUE 3/ 2/92	11.57		
03/03/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05300/UNITS ON 701.27 UNITS DUE 3/ 2/92	37.17		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
03/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.13319/UNITS ON 496.00 UNITS DUE 2/29/92	66.06		
03/03/92	FED BASIS ADJUSTED BY $27.74- DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $27.74-			27.74-
03/03/92	INCOME ON INCOME STOCK FUND $ 0.15255/UNITS ON 532.00 UNITS DUE 2/29/92	81.16		
03/03/92	FED BASIS ADJUSTED BY $219.58 INCOME STOCK FUND STATE COST ADJUSTED BY $219.58			219.58
03/04/92	PURCHASED 217.47 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 4/92		217.47-	217.47
03/05/92	PURCHASED 11.03 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 5/92		11.03-	11.03
04/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 3/1/92 TO 3/31/92	4.53		
04/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.59-		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/02/92	PURCHASED 3.94 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 2/92		3.94-	3.94
04/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01900/UNITS ON 190.66 UNITS DUE 4/ 1/92	3.62		
04/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00200/UNITS ON 655.64 UNITS DUE 4/ 1/92	1.31		
04/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.03100/UNITS ON 178.73 UNITS DUE 4/ 1/92	5.54		
04/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.06000/UNITS ON 210.31 UNITS DUE 4/ 1/92	12.62		
04/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05600/UNITS ON 701.27 UNITS DUE 4/ 1/92	39.27		
04/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.06170/UNITS ON 496.00 UNITS DUE 4/ 1/92	30.60		
[illegible]	FED BASIS ADJUSTED BY [illegible] DISCIPLINED EQUITY FUND SHARE COST ADJUSTED BY [illegible]			57.53

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/02/92	INCOME ON INCOME STOCK FUND $ 0.09448/UNITS ON 532.00 UNITS DUE 3/31/92	50.26		
04/03/92	PURCHASED 143.22 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 3/92		143.22-	143.22
04/06/92	PURCHASED 11.65 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 6/92		11.65-	11.65
04/10/92	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY INC TAX TAX DUE ON FORM 1041 FOR CALENDAR YEAR RETURN		436.00-	
04/10/92	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY INC TAX TAX DUE ON FORM 2 FOR CALENDAR YEAR RETURN		78.00-	
04/10/92	SOLD 514 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/10/92		514.00	514.00-
04/13/92	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY EST INC TAX INSTALLMENT ON WIS FIDUCIARY INC TAX		80.00-	

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/13/92	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY EST INC TAX INSTALLMENT ON FED FIDUCIARY INCOME TAX		440.00-	
04/13/92	SOLD 520 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/13/92		520.00	520.00-
04/28/92	CASH RECEIPT PAID FROM ACCOUNT# 11041768400 ADDITIONS TO ACCOUNT ANNUAL CONTRIBUTION		5,000.00	
04/29/92	PURCHASED 5,000 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/29/92		5,000.00-	5,000.00
05/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 4/1/92 TO 4/30/92	3.65		
05/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.49-		
05/04/92	PURCHASED 3.16 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 4/92		3.16-	3.16

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01100/UNITS ON 190.66 UNITS DUE 5/ 1/92	2.10		
05/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.01100/UNITS ON 178.73 UNITS DUE 5/ 1/92	1.97		
05/04/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05500/UNITS ON 210.31 UNITS DUE 5/ 1/92	11.57		
05/04/92	INCOME ON HELMSMAN LTD VOLATILITY 80 $ 0.05100/UNITS ON 701.27 UNITS DUE 5/ 1/92	35.76		
05/04/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.05468/UNITS ON 496.00 UNITS DUE 4/30/92	27.12		
05/04/92	FED BASIS ADJUSTED BY $21.91- DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $21.91-			21.91-
05/04/92	INCOME ON INCOME STOCK FUND $ 0.03641/UNITS ON 532.00 UNITS DUE 4/30/92	19.37		
05/04/92	FED BASIS ADJUSTED BY $10.37 INCOME STOCK FUND STATE COST ADJUSTED BY $10.37			10.37

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/05/92	PURCHASED 97.89 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 5/92		97.89-	97.89
05/06/92	PURCHASED 128.123 UNITS HELMSMAN GROWTH EQUITY TRADE DATE 5/ 5/92 128.123 UNITS AT $15.61		2,000.00-	2,000.00
05/06/92	SOLD 1,989.08 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 6/92		1,989.08	1,989.08-
05/18/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11010999099 FID INC TAX PREPARATION FEE TO BANK ONE WIS TRUST COMPANY	205.00-		
05/18/92	SOLD 205 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/18/92		205.00	205.00-
06/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 5/1/92 TO 5/31/92	11.71		
06/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.34-		

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/02/92	PURCHASED 10.37 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 2/92		10.37-	10.37
06/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.05000/UNITS ON 190.66 UNITS DUE 6/ 1/92	9.53		
06/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.07000/UNITS ON 178.73 UNITS DUE 6/ 1/92	12.51		
06/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05500/UNITS ON 210.31 UNITS DUE 6/ 1/92	11.57		
06/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05300/UNITS ON 701.27 UNITS DUE 6/ 1/92	37.17		
06/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.13422/UNITS ON 496.00 UNITS DUE 5/31/92	66.57		
06/02/92	FED BASIS ADJUSTED BY $120.60 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $120.60			120.60
06/02/92	INCOME ON INCOME STOCK FUND $ 0.15670/UNITS ON 532.00 UNITS DUE 5/31/92	83.37		

3609

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/03/92	PURCHASED 220.72 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 3/92		220.72-	220.72
06/04/92	PURCHASED 14.59 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 4/92		14.59-	14.59
06/08/92	PURCHASED 6.36 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 8/92		6.36-	6.36
06/09/92	SOLD 7.95 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 9/92		7.95	7.95-
06/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 6/23/92	750.00-		
06/24/92	SOLD 750 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/24/92		750.00	750.00-
07/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 6/1/92 TO 6/30/92	10.04		
07/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.13-		

3610

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/02/92	PURCHASED 8.91 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 2/92		8.91-	8.91
07/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01500/UNITS ON 190.66 UNITS DUE 7/ 1/92	2.86		
07/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00100/UNITS ON 783.76 UNITS DUE 7/ 1/92	0.78		
07/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.03500/UNITS ON 178.73 UNITS DUE 7/ 1/92	6.26		
07/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05600/UNITS ON 210.31 UNITS DUE 7/ 1/92	11.78		
07/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05400/UNITS ON 701.27 UNITS DUE 7/ 1/92	37.87		
07/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.05878/UNITS ON 496.00 UNITS DUE 6/30/92	29.16		
07/02/92	FED BASIS ADJUSTED BY $209.24 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $209.24			209.24

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/02/92	INCOME ON INCOME STOCK FUND $ 0.10451/UNITS ON 532.00 UNITS DUE 6/30/92	55.60		
07/02/92	FED BASIS ADJUSTED BY $162.44 INCOME STOCK FUND STATE COST ADJUSTED BY $162.44			162.44
07/06/92	PURCHASED 156.68 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 6/92		156.68-	156.68
08/03/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.04725/UNITS ON 496.00 UNITS DUE 7/31/92	23.44		
08/03/92	INCOME ON INCOME STOCK FUND $ 0.03890/UNITS ON 532.00 UNITS DUE 7/31/92	20.70		
08/03/92	FED BASIS ADJUSTED BY $12.06 INCOME STOCK FUND STATE COST ADJUSTED BY $12.06			12.06
08/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 7/1/92 TO 7/31/92	8.79		
08/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	0.93-		

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/04/92	PURCHASED 52 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 4/92		52.00-	52.00
08/04/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.01000/UNITS ON 190.66 UNITS DUE 8/ 3/92	1.91		
08/04/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00100/UNITS ON 783.76 UNITS DUE 8/ 3/92	0.78		
08/04/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.00500/UNITS ON 178.73 UNITS DUE 8/ 3/92	0.89		
08/04/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05700/UNITS ON 210.31 UNITS DUE 8/ 3/92	11.99		
08/04/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05400/UNITS ON 701.27 UNITS DUE 8/ 3/92	37.87		
08/05/92	PURCHASED 53.44 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 5/92		53.44-	53.44

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/06/92	PURCHASED 12.76 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 6/92		12.76-	12.76
09/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 8/1/92 TO 8/31/92	8.69		
09/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.20-		
09/02/92	PURCHASED 7.49 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 2/92		7.49-	7.49
09/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY $ 0.03500/UNITS ON 190.66 UNITS DUE 9/ 1/92	6.67		
09/02/92	INCOME ON HELMSMAN GROWTH EQUITY $ 0.00500/UNITS ON 783.76 UNITS DUE 9/ 1/92	3.92		
09/02/92	INCOME ON HELMSMAN INCOME EQUITY $ 0.06400/UNITS ON 178.73 UNITS DUE 9/ 1/92	11.44		
[illegible]	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.0[illegible]/UNITS ON [illegible] UNITS DUE 9/ 1/92	11.78		

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/02/92	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.05400/UNITS ON 701.27 UNITS DUE 9/ 1/92	37.87		
09/02/92	INCOME ON DISCIPLINED EQUITY FUND $ 0.12083/UNITS ON 496.00 UNITS DUE 8/31/92	59.93		
09/02/92	INCOME ON INCOME STOCK FUND $ 0.16268/UNITS ON 532.00 UNITS DUE 8/31/92	86.55		
09/03/92	PURCHASED 218.16 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 3/92		218.16-	218.16
09/04/92	PURCHASED 12.92 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 4/92		12.92-	12.92
09/17/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN GROWTH EQUITY		6.27	
09/18/92	PURCHASED 6.27 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/18/92		6.27-	6.27
10/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 9/1/92 TO 9/30/92	8.64		

TRANSACTION DETAIL

[illegible] JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041542300

DATE [illegible]	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible] 01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH NOT CHG: HELMSMAN PRIME FUND	1.20-		
[illegible] /92	PURCHASED 7.44 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 2/92		7.44-	7.44
[illegible] /92	INCOME ON HELMSMAN DISCIPLINED EQUITY @ 0.0240%/UNITS ON 19[illegible] UNITS DUE [illegible]	4.50		
[illegible]	INCOME ON HELMSMAN GROWTH EQUITY @ 0.0000%/UNITS ON 283.76 UNITS DUE 10/ 1/92	6.[illegible]		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY @ 0.03700/UNITS ON 178.73 UNITS DUE 10/ 1/92	6.61		
[illegible] /92	INCOME ON HELMSMAN INCOME PORTFOLIO @ 0.05700/UNITS ON 210.37 UNITS DUE 10/ 1/92	11.99		
[illegible] /92	INCOME ON HELMSMAN LTD VOLATILITY BD @ 0.0[illegible]/UNITS ON [illegible] UNITS DUE [illegible]	37.87		
	INCOME ON DISCIPLINED EQUITY FUND [illegible] UNITS ON [illegible] UNITS DUE [illegible]	28.82		

TRANSACTION DETAIL

. JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/02/92	FED BASIS ADJUSTED BY $268.27 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $268.27			268.27
10/02/92	INCOME ON INCOME STOCK FUND $ 0.08601/UNITS ON 532.00 UNITS DUE 9/30/92	45.76		
10/02/92	FED BASIS ADJUSTED BY $63.60 INCOME STOCK FUND STATE COST ADJUSTED BY $63.60			63.60
10/05/92	PURCHASED 141.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 5/92		141.70-	141.70
10/08/92	PURCHASED 12.54 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 8/92		12.54-	12.54
11/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 10/1/92 TO 10/31/92	9.39		
11/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.24-		

TRANSACTION DETAIL

[illegible] SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 1104154230[illegible]

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT COST
[illegible] 03/92	PURCHASED 8.15 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 3/92		8.15-	8.15
[illegible] 03/92	INCOME ON HELMSMAN DISCIPLINED EQUITY @ 0.01100/UNITS ON 190.66 UNITS [illegible]	2.10		
[illegible] 92	INCOME ON HELMSMAN GROWTH EQUITY @ [illegible]	2.35		
[illegible]	INCOME ON HELMSMAN INCOME EQUITY @ [illegible]	[illegible]		
[illegible]	INCOME ON HELMSMAN INCOME FORTFOLIO @ [illegible]/UNITS ON 210.[illegible] UNITS [illegible]	[illegible]		
[illegible]	INCOME ON HELMSMAN [illegible] VOLATILITY BD @ [illegible]/UNITS [illegible]	36.47		
[illegible]	INCOME ON [illegible] EQUITY INC. @ [illegible]	[illegible]		
[illegible]	[illegible]			[illegible]

TRANSACTION DETAIL

[illegible] JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 1104154230[illegible]

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
11/03/92	INCOME ON INCOME STOCK FUND # 0.03463 UNITS ON 532.00 UNITS DUE 10/31/92	18.42		
11/04/92	PURCHASED 93.55 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 4/92		93.55-	93.55
11/05/92	PURCHASED 10.73 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 5/92		10.73-	10.73
11/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 11/1/92 TO 11/30/92	9.39		
12/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.20-		
12/02/92	PURCHASED 8.19 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 2/92		8.19-	8.19
12/02/92	INCOME ON HELMSMAN DISCIPLINED EQUITY # 0.04100/UNITS ON 190.65 UNITS DUE 12/ 1/92	7.82		
	INCOME ON HELMSMAN GROWTH EQUITY # [illegible] UNITS ON [illegible] UNITS DUE [illegible]	3.14		

TRANSACTION DETAIL

F JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
[illegible]	INCOME ON HELMSMAN INCOME EQUITY $ 0.05900/UNITS ON 178.73 UNITS DUE 12/ 1/92	10.55		
12/02/92	INCOME ON HELMSMAN INCOME PORTFOLIO $ 0.05200/UNITS ON 210.31 UNITS DUE 12/ 1/92	10.94		
[illegible]	INCOME ON HELMSMAN LTD VOLATILITY BD $ 0.04900/UNITS ON 701.27 UNITS DUE [illegible]	34.36		
[illegible]	INCOME ON DISCIPLINED EQUITY FUND $ 0.12879/UNITS ON 495.00 UNITS DUE [illegible]	63.80		
[illegible]	FED BASIS ADJUSTED BY $219.29 DISCIPLINED EQUITY FUND STATE COST ADJUSTED BY $219.29			219.29
[illegible]	INCOME ON INCOME STOCK FUND $ 0.12169/UNITS ON 512.00 UNITS DUE [illegible]	63.02		
[illegible]	PURCHASED 216.71 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 3/9[illegible]		216.71-	216.71

TRANSACTION DETAIL

J. JAMES SENSENBRENNER III TR — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 1104154300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/04/92	PURCHASED 10.92 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 4/92		10.92-	10.92
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN GROWTH EQUITY		440.47	
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN INCOME PORTFOLIO		23.13	
12/29/92	RECEIVED A ST CAPITAL GAINS DISTRIBUTION HELMSMAN INCOME PORTFOLIO		3.79	
12/29/92	RECEIVED A LT CAPITAL GAINS DISTRIBUTION HELMSMAN LTD VOLATILITY BD		36.47	
12/29/92	RECEIVED A ST CAPITAL GAINS DISTRIBUTION HELMSMAN LTD VOLATILITY BD		29.45	
12/30/92	PURCHASED 533.31 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/30/92		533.31-	533.31
12/31/92	CASH DISBURSEMENT TRANSFER TO PRINCIPAL	1,112.08-		
12/31/92	CASH RECEIPT TRANSFER FROM INCOME		1,112.08	
	ADVISORY FEE REBATE CONSOLIDATED FOR THE PERIOD	118.84		

TRANSACTION DETAIL

: JAMES SENSENBRENNER III TR 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041542300

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
	12/31/91 TO 12/31/92			
12/31/92	ENDING BALANCES	0.00	0.00	54,008.99

INCOME CASH	+	PRINCIPAL CASH	=	NET CASH
0.00		0.00		0.00

INVESTMENT REVIEW

I JAMES SENSENBRENNER III TR — SUMMARY OF ASSETS AS OF 12/31/92 — ACCOUNT NUMBER: [illegible]

DESCRIPTION	TAX COST	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	YIELD AT MARKET
CASH EQUIVALENTS	4,491.49	4,491.49	7.55	143.28	3.19
MUTUAL FUNDS - FIXED INCOME	9,117.86	9,610.11	16.15	596.31	6.21
COMMON & MUTUAL FUNDS - EQUITIES	40,399.64	45,411.73	76.31	1,214.24	2.67
TOTAL ACCOUNT	54,008.99	59,513.33	100.00	1,953.83	3.28

INVESTMENT REVIEW

Page

[illegible] JAMES SENSENBRENNER III TR — DETAIL OF ASSETS AS OF 12/31/92 — ACCOUNT NUMBER: 110415.1 [illegible]

SHARES PER VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURRENT YIELD TO MKT
	CASH						
0.00	INCOME CASH	0.00		0.00	0.00		
0.00	PRINCIPAL CASH	0.00		0.00	0.00		
0.00	NET CASH	0.00		0.00	0.00		
	CASH EQUIVALENTS						
4,491.49	HELMSMAN PRIME MONEY MARKET PORT	4,491.49	1.00	4,491.49	7.55	143.28	3.19
	MUTUAL FUNDS - FIXED INCOME						
210.31	HELMSMAN INCOME PORTFOLIO	2,000.00	10.15	2,134.60	3.59	144.69	6.78
701.27	HELMSMAN LTD VOLATILITY BD	7,117.86	10.66	7,475.51	12.56	451.62	6.04
	TOTAL MUTUAL FUNDS - FIXED INCOME	9,117.86		9,610.11	16.15	596.31	6.21
	COMMON & MUTUAL FUNDS - EQUITIES						
[illegible]	DISCIPLINED EQUITY FUND	[illegible]	18.16	13,968.05	23.47	447.00	3.2[illegible]
[illegible]	[illegible]	[illegible]	12.29	2,343.17	3.94	[illegible]	2.[illegible]
	[illegible]	[illegible]	[illegible]	12,701.78	21.35	28.[illegible]	0.2

INVESTMENT REVIEW

I JAMES SENSENBRENNER III TR — DETAIL OF ASSETS AS OF 12/31/92 — ACCOUNT NUMBER: 1104154.2300

SHARES FACE VALUE	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURRENT YLD TO MAT
178.73	HELMSMAN INCOME EQUITY	2,000.00	12.75	2,278.82	3.83	75.96	[illegible]
532	INCOME STOCK FUND	12,605.08	26.53	14,116.09	23.72	607.01	[illegible]
TOTAL COMMON & MUTUAL FUNDS - EQUITIES		40,399.64		45,411.73	76.31	1,214.24	[illegible]
TOTAL ACCOUNT		54,[illegible].59		59,513.33	100.00	1,953.83	[illegible]

INVESTMENT REVIEW

I WALS SENSENBRENNER III TR DETAIL OF PENDING ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 110415

PENDING TRADES: NONE

F JAMES SENSENBRENNER JR 1976
ACCOUNT NUMBER 11041591299
STATEMENT
FOR THE PERIOD 12/31/91 TO 12/31/92

BANK ONE WISCONSIN TRUST CO NA
111 E WISCONSIN AVE
MILWAUKEE, WI 53202

ADMINISTRATOR:
LYNN E PAULL 414-765-2751

INVESTMENT MANAGER:
DOUGLAS O KLOPPENBURG 414-765-3342

F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

TRANSACTION SUMMARY

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
BEGINNING BALANCES 12/31/91	816.08	816.08-	201,140.01
CASH RECEIPTS			
NET INTEREST	7,375.97		
NET DIVIDENDS	10,658.44		
OTHER CASH RECEIPTS	67.00		
TOTAL CASH RECEIPTS	18,101.41	0.00	0.00
CASH DISBURSEMENTS			
DISTRIBUTIONS TO BENEFICIARIES	11,916.45-		
FIDUCIARY INCOME TAXES		1,171.00-	
ADMINISTRATIVE EXPENSES	5,857.72-		
TOTAL CASH DISBURSEMENTS	17,774.17-	1,171.00-	0.00
INVESTMENT TRANSACTIONS			
PURCHASES		26,950.00-	26,950.00
SALES/MATURITIES		25,000.00	25,109.38-
NET PURCHASES/SALES CASH MANAGEMENT VEHICLE		2,793.76	2,793.76-
TOTAL INVESTMENT TRANSACTIONS		843.76	953.14-
ENDING BALANCES 12/31/92	1,143.32	1,143.32-	200,186.87

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/31/91	BEGINNING BALANCES	816.08	816.08-	201,140.01
01/02/92	DIVIDEND ON BANC ONE CORP $ 0.29000 /SH ON 470.00 SHARES DUE 1/ 2/92	136.30		
01/02/92	DIVIDEND ON MERCK & CO INC $ 0.63000 /SH ON 937.00 SHARES DUE 1/ 2/92	590.31		
01/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 12/1/91 TO 12/31/91	133.88		
01/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	11.55-		
01/03/92	PURCHASED 848.94 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 3/92		848.94-	848.94
01/08/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 12/91	11.46		
01/08/92	PURCHASED 11.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 8/92		11.46-	11.46

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/15/92	INTEREST ON UNITED STATES TREAS 8.625% 1/15/95 $ 0.04312 /PV ON 25,000.00 PV DUE 1/15/92	1,078.13		
01/15/92	PURCHASED 1,078.13 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/15/92		1,078.13-	1,078.13
01/15/92	DIVIDEND ON PACIFIC GAS & ELEC CO $ 0.41000 /SH ON 175.00 SHARES DUE 1/15/92	71.75		
01/16/92	PURCHASED 71.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/16/92		71.75-	71.75
01/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 1/23/92	1,456.30-		
01/24/92	SOLD 1,456.3 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/24/92		1,456.30	1,456.30-
01/27/92	DIVIDEND ON GENERAL ELEC CO $ 0.55000 /SH ON 225.00 SHARES DUE 1/27/92	123.75		
01/28/92	PURCHASED 123.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/28/92		123.75-	123.75

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 1/1/92 TO 1/31/92	129.15		
02/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	11.81-		
02/04/92	PURCHASED 117.34 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 4/92		117.34-	117.34
02/10/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 01/92	8.80		
02/11/92	PURCHASED 8.8 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/11/92		8.80-	8.80
02/18/92	DIVIDEND ON ABBOTT LABS $ 0.25000 /SH ON 1,800.00 SHARES DUE 2/15/92	450.00		
02/18/92	INTEREST ON UNITED STATES TREAS NT 8.75% 8/15/93 $ 0.04375 /PV ON 25,000.00 PV DUE 2/15/92	1,093.75		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/18/92	PURCHASED 1,543.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/18/92		1,543.75-	1,543.75
03/02/92	DIVIDEND ON WISCONSIN ENERGY CORP $ 0.46500 /SH ON 170.00 SHARES DUE 3/ 1/92	79.05		
03/02/92	PURCHASED 79.05 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 2/92		79.05-	79.05
03/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 2/1/92 TO 2/29/92	112.04		
03/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	11.14-		
03/02/92	10 % STOCK DIVIDEND BANC ONE CORP 47.00 ADDITIONAL SHARES RECEIVED			
03/03/92	PURCHASED 100.9 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 3/92		100.90-	100.90

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
03/05/92	PURCHASED 8.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 5/92		8.32-	8.32
03/10/92	CASH DISBURSEMENT PAID TO F JAMES SENSENBRENNER JR DEPOSIT TO CHECKING ACCOUNT 0046-2366	3,351.97-		
03/10/92	SOLD 3,351.97 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/10/92		3,351.97	3,351.97-
03/10/92	DIVIDEND ON AMOCO CORP $ 0.55000 /SH ON 200.00 SHARES DUE 3/10/92	110.00		
03/10/92	DIVIDEND ON EXXON CORP $ 0.67000 /SH ON 300.00 SHARES DUE 3/10/92	201.00		
03/10/92	DIVIDEND ON HOUSTON INDS INC $ 0.74000 /SH ON 150.00 SHARES DUE 3/10/92	111.00		
03/10/92	DIVIDEND ON INTERNATIONAL BUSINESS MACHS CORP $ 1.21000 /SH ON 100.00 SHARES DUE 3/10/92	121.00		
03/10/92	DIVIDEND ON WARNER LAMBERT CO $ 0.51000 /SH ON 182.00 SHARES DUE 3/10/92	92.82		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
03/11/92	PURCHASED 635.82 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/11/92		635.82-	635.82
03/12/92	DIVIDEND ON MONSANTO CO $ 0.52000 /SH ON 250.00 SHARES DUE 3/12/92	130.00		
03/13/92	PURCHASED 130 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/13/92		130.00-	130.00
03/16/92	DIVIDEND ON DU PONT E I DE NEMOURS & CO $ 0.42000 /SH ON 150.00 SHARES DUE 3/14/92	63.00		
03/16/92	PURCHASED 63 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/16/92		63.00-	63.00
03/31/92	INTEREST ON UNITED STATES TREAS NT 8.75% 9/30/92 $ 0.04375 /PV ON 25,000.00 PV DUE 3/31/92	1,093.75		
03/31/92	PURCHASED 1,093.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/31/92		1,093.75-	1,093.75
03/31/92	DIVIDEND ON BANC ONE CORP $ 0.29000 /SH ON 517.00 SHARES DUE 3/31/92	149.93		

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/01/92	PURCHASED 149.93 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 1/92		149.93-	149.93
04/01/92	DIVIDEND ON MERCK & CO INC $ 0.69000 /SH ON 937.00 SHARES DUE 4/ 1/92	646.53		
04/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 3/1/92 TO 3/31/92	111.89		
04/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	11.72-		
04/02/92	PURCHASED 746.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 2/92		746.70-	746.70
04/06/92	PURCHASED 8.71 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 6/92		8.71-	8.71
04/10/92	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY INC TAX TAX DUE ON FORM 1041 FOR CALENDAR YEAR RETURN		517.00-	

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/10/92	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY INC TAX TAX DUE ON FORM 2 FOR CALENDAR YEAR RETURN		64.00-	
04/10/92	SOLD 581 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/10/92		581.00	581.00-
04/13/92	CASH DISBURSEMENT PAID TO WISCONSIN DEPT OF REVENUE STATE FIDUCIARY EST INC TAX INSTALLMENT ON WIS FIDUCIARY INC TAX		70.00-	
04/13/92	SOLD 70 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/13/92		70.00	70.00-
04/13/92	CASH DISBURSEMENT PAID TO INTERNAL REVENUE SERVICE FED FIDUCIARY EST INC TAX		520.00-	
04/14/92	SOLD 520 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/14/92		520.00	520.00-
04/15/92	DIVIDEND ON PACIFIC GAS & ELEC CO $ 0.44000 /SH ON 175.00 SHARES DUE 4/15/92	77.00		

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F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/16/92	PURCHASED 77 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/16/92		77.00-	77.00
04/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 4/23/92	1,381.88-		
04/24/92	SOLD 1,381.88 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/24/92		1,381.88	1,381.88-
04/27/92	DIVIDEND ON GENERAL ELEC CO $ 0.55000 /SH ON 225.00 SHARES DUE 4/27/92	123.75		
04/28/92	PURCHASED 123.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/28/92		123.75-	123.75
05/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 4/1/92 TO 4/30/92	106.56		
05/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	11.34-		
05/04/92	PURCHASED 95.22 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 4/92		95.22-	95.22

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/06/92	PURCHASED 8.49 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 6/92		8.49-	8.49
05/12/92	PURCHASED 500 SH DUN & BRADSTREET CORP TRADE DATE 5/ 5/92 PURCHASED THROUGH EXECUTION SERVICES PAID $75.00 BROKERAGE 500 SHARES AT $53.75		26,950.00-	26,950.00
05/13/92	SOLD 26,950 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/13/92		26,950.00	26,950.00-
05/15/92	DIVIDEND ON ABBOTT LABS $ 0.30000 /SH ON 1,800.00 SHARES DUE 5/15/92	540.00		
05/18/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11010999099 FID INC TAX PREPARATION FEE TO BANK ONE WIS TRUST COMPANY	205.00-		
05/18/92	PURCHASED 335 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/18/92		335.00-	335.00
05/22/92	3 FOR 1 STOCK SPLIT MERCK & CO INC 1,874.00 ADDITIONAL SHARES RECEIVED			

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/29/92	2 FOR 1 STOCK SPLIT ABBOTT LABS 1,800.00 ADDITIONAL SHARES RECEIVED			
06/01/92	DIVIDEND ON WISCONSIN ENERGY CORP $ 0.48750 /SH ON 170.00 SHARES DUE 6/ 1/92	82.88		
06/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 5/1/92 TO 5/31/92	51.60		
06/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	5.74-		
06/02/92	PURCHASED 128.74 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 2/92		128.74-	128.74
06/04/92	PURCHASED 4.29 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 4/92		4.29-	4.29
06/10/92	CASH DISBURSEMENT PAID TO F JAMES SENSENBRENNER JR DEPOSIT TO CHECKING ACCOUNT 0046-2366	2,218.52-		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 | 12/31/91 THROUGH 12/31/92 | ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/10/92	SOLD 2,218.52 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/10/92		2,218.52	2,218.52-
06/10/92	DIVIDEND ON AMOCO CORP $ 0.55000 /SH ON 200.00 SHARES DUE 6/10/92	110.00		
06/10/92	DIVIDEND ON DUN & BRADSTREET CORP $ 0.57000 /SH ON 500.00 SHARES DUE 6/10/92	285.00		
06/10/92	DIVIDEND ON EXXON CORP $ 0.72000 /SH ON 300.00 SHARES DUE 6/10/92	216.00		
06/10/92	DIVIDEND ON HOUSTON INDS INC $ 0.74000 /SH ON 150.00 SHARES DUE 6/10/92	111.00		
06/10/92	DIVIDEND ON INTERNATIONAL BUSINESS MACHS CORP $ 1.21000 /SH ON 100.00 SHARES DUE 6/10/92	121.00		
06/10/92	DIVIDEND ON WARNER LAMBERT CO $ 0.51000 /SH ON 182.00 SHARES DUE 6/10/92	92.82		

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/11/92	PURCHASED 935.82 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/11/92		935.82-	935.82
06/12/92	DIVIDEND ON DU PONT E I DE NEMOURS & CO $ 0.44000 /SH ON 150.00 SHARES DUE 6/12/92	66.00		
06/12/92	DIVIDEND ON MONSANTO CO $ 0.56000 /SH ON 250.00 SHARES DUE 6/12/92	140.00		
06/15/92	PURCHASED 206 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/15/92		206.00-	206.00
06/30/92	DIVIDEND ON BANC ONE CORP $ 0.29000 /SH ON 517.00 SHARES DUE 6/30/92	149.93		
06/30/92	3 FOR 2 STOCK SPLIT WISCONSIN ENERGY CORP 85.00 ADDITIONAL SHARES RECEIVED			
07/01/92	PURCHASED 149.93 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 1/92		149.93-	149.93
07/01/92	DIVIDEND ON MERCK & CO INC $ 0.23000 /SH ON 2,811.00 SHARES DUE 7/ 1/92	646.53		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 | 12/31/91 THROUGH 12/31/92 | ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 6/1/92 TO 6/30/92	17.08		
07/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	1.88-		
07/02/92	PURCHASED 661.73 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 2/92		661.73-	661.73
07/06/92	PURCHASED 1.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 6/92		1.46-	1.46
07/15/92	INTEREST ON UNITED STATES TREAS 8.625% 1/15/95 $ 0.04312 /PV ON 25,000.00 PV DUE 7/15/92	1,078.13		
07/15/92	PURCHASED 1,078.13 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/15/92		1,078.13-	1,078.13
07/15/92	DIVIDEND ON PACIFIC GAS & ELEC CO $ 0.44000 /SH ON 175.00 SHARES DUE 7/15/92	77.00		

TRANSACTION DETAIL

F. JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/16/92	PURCHASED 77 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/16/92		77.00-	77.00
07/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 7/23/92	1,380.56-		
07/24/92	SOLD 1,380.56 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/24/92		1,380.56	1,380.56-
[illegible] 92	DIVIDEND ON GENERAL ELEC CO $ 0.55000 /SH ON 225.00 SHARES DUE [illegible]	123.75		
[illegible] 92	PURCHASED 123.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/28/92		123.75-	123.75
[illegible] 03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 7/1/92 TO 7/31 92	19.43		
08/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	2.25-		
[illegible] 92	PURCHASED [illegible] DOLLARS HELMSMAN PRIME FUND TRADE DATE [illegible]		17.18-	17.18

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/06/92	PURCHASED 1.72 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 6/92		1.72-	1.72
08/17/92	INTEREST ON UNITED STATES TREAS NT 8.75% 8/15/93 $ 0.04375 /PV ON 25,000.00 PV DUE 8/15/92	1,093.75		
08/17/92	PURCHASED 1,642.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/17/92		1,642.75-	1,642.75
08/18/92	DIVIDEND ON ABBOTT LABS $ 0.15000 /SH ON 3,600.00 SHARES DUE 8/15/92	540.00		
08/19/92	SOLD 9 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/19/92		9.00	9.00-
09/01/92	DIVIDEND ON WISCONSIN ENERGY CORP $ 0.32500 /SH ON 255.00 SHARES DUE 9/ 1/92	82.88		
09/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 8/1/92 TO 8/31/92	19.62		
[illegible]	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	2.47-		

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TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/02/92	PURCHASED 100.03 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 2/92		100.03-	100.03
09/04/92	CASH RECEIPT ABBOTT LABS DOMESTIC DIVIDEND TRUST ASSET RIGHTS REDEMPTION TAXABLE AS A DIVIDEND ABBOTT LABS $.0025 PER SHARE	9.00		
09/04/92	PURCHASED 1.83 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 4/92		1.83-	1.83
09/08/92	PURCHASED 9 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 8/92		9.00-	9.00
09/10/92	CASH DISBURSEMENT PAID TO F JAMES SENSENBRENNER JR DEPOSIT TO CHECKING ACCOUNT 0046-2366	3,616.77-		
09/10/92	SOLD 3,616.77 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/10/92		3,616.77	3,616.77-
09/10/92	DIVIDEND ON AMOCO CORP $ 0.55000 /SH ON 200.00 SHARES DUE 9/10/92	110.00		

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/10/92	DIVIDEND ON DUN & BRADSTREET CORP $ 0.57000 /SH ON 500.00 SHARES DUE 9/10/92	285.00		
09/10/92	DIVIDEND ON EXXON CORP $ 0.72000 /SH ON 300.00 SHARES DUE 9/10/92	216.00		
09/10/92	DIVIDEND ON HOUSTON INDS INC $ 0.75000 /SH ON 150.00 SHARES DUE 9/10/92	112.50		
09/10/92	DIVIDEND ON INTERNATIONAL BUSINESS MACHS CORP $ 1.21000 /SH ON 100.00 SHARES DUE 9/10/92	121.00		
09/10/92	DIVIDEND ON WARNER LAMBERT CO $ 0.51000 /SH ON 182.00 SHARES DUE 9/10/92	92.82		
09/11/92	PURCHASED 937.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/11/92		937.32-	937.32
09/11/92	DIVIDEND ON MONSANTO CO $ 0.56000 /SH ON 250.00 SHARES DUE 9/11/92	140.00		
09/14/92	DIVIDEND ON DU PONT E I DE NEMOURS & CO $ 0.44000 /SH ON 150.00 SHARES DUE 9/12/92	66.00		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/14/92	PURCHASED 206 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/14/92		206.00-	206.00
09/30/92	MATURED 25,000 PV UNITED STATES TREAS NT 8.75% 9/30/92 TRADE DATE 9/30/92 25,000 PV AT 100 %		25,000.00	25,109.38-
09/30/92	INTEREST ON UNITED STATES TREAS NT 8.75% 9/30/92 $ 0.04375 /PV ON 25,000.00 PV DUE 9/30 92	1,093.75		
09/30/92	PURCHASED 26,093.75 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/30/92		26,093.75-	26,093.75
09/30/92	DIVIDEND ON BANC ONE CORP $ 0.32000 /SH ON 517.00 SHARES DUE 9/30/92	165.44		
10/01/92	PURCHASED 165.44 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 1/92		165.44-	165.44
10/01/92	DIVIDEND ON MERCK & CO INC $ 0.25000 /SH ON 2,811.00 SHARES DUE10/ 1/92	702.75		
10/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 9/1/92 TO 9/30/92	18.19		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	2.35-		
10/02/92	PURCHASED 718.59 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 2/92		718.59-	718.59
10/08/92	PURCHASED 1.78 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 8/92		1.78-	1.78
10/08/92	PURCHASED 32,653.27 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 10/ 8/92 PURCHASED THROUGH MONEY MARKET DESK 32,653.27 DOLLARS AT 100 %		32,653.27-	32,653.27
10/08/92	SOLD 32,653.27 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 8/92 SOLD THROUGH MONEY MARKET DESK 32,653.27 DOLLARS AT 100 %		32,653.27	32,653.27-
10/15/92	DIVIDEND ON PACIFIC GAS & ELEC CO $ 0.44000 /SH ON 175.00 SHARES DUE10/15/92	77.00		

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/16/92	PURCHASED 77 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 10/16/92		77.00-	77.00
10/26/92	TRUSTEE FEE FOR THE PERIOD THROUGH 10/23/92	1,340.14-		
10/26/92	SOLD 1,340.14 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 10/26/92		1,340.14	1,340.14-
10/26/92	DIVIDEND ON GENERAL ELEC CO $ 0.59000 /SH ON 225.00 SHARES DUE10/26/92	132.75		
10/27/92	PURCHASED 132.75 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 10/27/92		132.75-	132.75
11/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 10/1/92 TO 10/31/92	19.50		
11/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	2.51-		
11/02/92	INCOME HELMSMAN TAX FREE FUND INTEREST FROM 10/1/92 TO 10/31/92	47.73		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 | 12/31/91 THROUGH 12/31/92 | ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
11/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN TAX FREE FUND CASH MGT CHG: HELMSMAN TAX FREE FUND	8.58-		
11/03/92	PURCHASED 56.14 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 11/ 3/92		56.14-	56.14
11/05/92	PURCHASED 5.3 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 11/ 5/92		5.30-	5.30
11/16/92	DIVIDEND ON ABBOTT LABS $ 0.15000 /SH ON 3,600.00 SHARES DUE11/15/92	540.00		
11/16/92	PURCHASED 540 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 11/16/92		540.00-	540.00
12/01/92	DIVIDEND ON WISCONSIN ENERGY CORP $ 0.32500 /SH ON 255.00 SHARES DUE12/ 1/92	82.88		
12/01/92	INCOME HELMSMAN TAX FREE FUND INTEREST FROM 11/1/92 TO 11/30/92	58.04		
12/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN TAX FREE FUND CASH MGT CHG: HELMSMAN TAX FREE FUND	10.50-		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 — 12/31/91 THROUGH 12/31/92 — ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/02/92	PURCHASED 130.42 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/ 2/92		130.42-	130.42
12/04/92	PURCHASED 4.84 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/ 4/92		4.84-	4.84
12/10/92	CASH DISBURSEMENT PAID TO F JAMES SENSENBRENNER JR DEPOSIT TO CHECKING ACCOUNT 0046-2366	2,729.19-		
12/10/92	SOLD 2,729.19 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/10/92		2,729.19	2,729.19-
12/10/92	DIVIDEND ON AMOCO CORP $ 0.55000 /SH ON 200.00 SHARES DUE12/10/92	110.00		
12/10/92	DIVIDEND ON DUN & BRADSTREET CORP $ 0.57000 /SH ON 500.00 SHARES DUE12/10/92	285.00		
12/10/92	DIVIDEND ON EXXON CORP $ 0.72000 /SH ON 300.00 SHARES DUE12/10/92	216.00		
12/10/92	DIVIDEND ON HOUSTON INDS INC $ 0.75000 /SH ON 150.00 SHARES DUE12/10/92	112.50		

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/10/92	DIVIDEND ON INTERNATIONAL BUSINESS MACHS CORP $ 1.21000 /SH ON 100.00 SHARES DUE12/10/92	121.00		
12/10/92	DIVIDEND ON WARNER LAMBERT CO $ 0.51000 /SH ON 182.00 SHARES DUE12/10/92	92.82		
12/11/92	PURCHASED 937.32 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/11/92		937.32-	937.32
12/11/92	DIVIDEND ON MONSANTO CO $ 0.56000 /SH ON 250.00 SHARES DUE12/11/92	140.00		
12/14/92	PURCHASED 140 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/14/92		140.00-	140.00
12/14/92	DIVIDEND ON DU PONT E I DE NEMOURS & CO $ 0.44000 /SH ON 150.00 SHARES DUE12/14/92	66.00		
12/15/92	PURCHASED 66 DOLLARS HELMSMAN TAX FREE FUND TRADE DATE 12/15/92		66.00-	66.00
	ADVISORY FEE REBATE CONSOLIDATED FOR THE PERIOD	46.74		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR 1976 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11041591299

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
	12/31/91 TO 12/31/92			
12/31/92	ENDING BALANCES	1,143.32	1,143.32-	200,186.87

INCOME CASH	PRINCIPAL CASH	NET CASH
1,143.32	1,143.32-	0.00

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR 1976

SUMMARY OF ASSETS AS OF 12/31/92

ACCOUNT NUMBER: 11041591299

DESCRIPTION	TAX COST	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	YIELD AT MARKET
CASH EQUIVALENTS	30,673.71	30,673.71	6.43	889.54	2.90
U S GOVERNMENT & AGENCIES	49,851.56	52,726.75	11.06	4,343.75	8.24
COMMON STOCK	119,661.60	393,471.64	82.51	11,209.22	2.85
TOTAL ACCOUNT	200,186.87	476,872.10	100.00	16,442.51	3.45

F JAMES SENSENBRENNER JR 1976 DETAIL OF ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11041591299

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MAT
	CASH						
1,143.32	INCOME CASH	1,143.32		1,143.32	0.24		
1,143.32-	PRINCIPAL CASH	1,143.32-		1,143.32-	0.24-		
0.00	NET CASH	0.00		0.00	0.00		
	CASH EQUIVALENTS						
30,673.71	HELMSMAN TAX FREE MONEY MARKET PORT	30,673.71	1.00	30,673.71	6.43	889.54	2.90
	U S GOVERNMENT & AGENCIES						
25,000	UNITED STATES TREAS NT 8.75% 8/15/93	25,062.50	103.19	25,797.00	5.41	2,187.50	8.48 3.51
25,000	UNITED STATES TREAS 8.625% 1/15/95	24,789.06	107.72	26,929.75	5.65	2,156.25	8.01 4.61
	TOTAL U S GOVERNMENT & AGENCIES	49,851.56		52,726.75	11.06	4,343.75	8.24
	COMMON STOCK						
3,600	ABBOTT LABS	1,823.93	30.38	109,350.00	22.93	2,160.00	1.98
200	AMOCO CORP	8,735.91	48.75	9,750.00	2.04	440.00	4.51

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR 1976 DETAIL OF ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11041591299

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MAT
517	BANC ONE CORP	7,557.89	53.13	27,465.63	5.76	661.76	2.41
150	DU PONT E I DE NEMOURS & CO	3,662.50	47.13	7,068.75	1.48	264.00	3.73
500	DUN & BRADSTREET CORP	26,950.00	57.75	28,875.00	6.06	1,140.00	3.95
300	EXXON CORP	8,298.75	61.13	18,337.50	3.85	864.00	4.71
225	GENERAL ELEC CO	8,521.87	85.50	19,237.50	4.03	567.00	2.95
150	HOUSTON INDS INC	4,893.75	45.88	6,881.25	1.44	450.00	6.54
100	INTERNATIONAL BUSINESS MACHS CORP	12,695.00	50.38	5,037.50	1.06	216.00	4.29
2,811	MERCK & CO INC	19,292.04	43.38	121,927.13	25.57	2,811.00	2.31
250	MONSANTO CO	7,539.06	57.63	14,406.25	3.02	560.00	3.89
175	PACIFIC GAS & ELEC CO	3,959.37	33.13	5,796.88	1.22	329.00	5.68
182	WARNER LAMBERT CO	4,828.69	69.13	12,580.75	2.64	414.96	3.30
255	WISCONSIN ENERGY CORP	902.84	26.50	6,757.50	1.42	331.50	4.91
TOTAL COMMON STOCK		119,661.60		393,471.64	82.51	11,209.22	2.85
TOTAL ACCOUNT		200,186.87		476,872.10	100.00	16,442.51	3.45

F JAMES SENSENBRENNER JR 1976 DETAIL OF PENDING ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11041591299

PENDING TRADES: NONE

F JAMES SENSENBRENNER JR-TTEE
ACCOUNT NUMBER 11040911400
STATEMENT
FOR THE PERIOD 12/31/91 TO 12/31/92

BANK ONE WISCONSIN TRUST CO NA
111 E WISCONSIN AVE
MILWAUKEE, WI 53202

ADMINISTRATOR:
ROBERT L HANLEY 414-765-2408

INVESTMENT MANAGER:
DOUGLAS O KLOPPENBURG 414-765-3342

F JAMES SENSENBRENNER JR
609 FORT WILLIAMS PKWY
ALEXANDRIA VA 22304-1813

TRANSACTION SUMMARY

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
BEGINNING BALANCES 12/31/91	148.00	148.00-	1,637,317.85
CASH RECEIPTS			
NET INTEREST	7,738.25		
NET DIVIDENDS	83,182.94		
OTHER CASH RECEIPTS	37.70		
TOTAL CASH RECEIPTS	90,958.89	0.00	0.00
CASH DISBURSEMENTS			
DISTRIBUTIONS TO BENEFICIARIES	70,047.59-		
ADMINISTRATIVE EXPENSES	6,059.30-		
OTHER DISBURSEMENTS	15,000.00-		
TOTAL CASH DISBURSEMENTS	91,106.89-	0.00	0.00
INVESTMENT TRANSACTIONS			
DISTRIBUTIONS IN KIND			9,477.13-
ASSETS RECEIVED IN KIND			9,477.13
NET PURCHASES/SALES CASH MANAGEMENT VEHICLE		148.00	148.00-
TOTAL INVESTMENT TRANSACTIONS		148.00	148.00-
ENDING BALANCES 12/31/92	0.00	0.00	1,637,169.85

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/31/91	BEGINNING BALANCES	148.00	148.00-	1,637,317.85
01/02/92	2 FOR 1 STOCK SPLIT KIMBERLY CLARK CORP 23,453.00 ADDITIONAL SHARES RECEIVED			
01/02/92	DIVIDEND ON FIRST CHICAGO CORP $ 0.50000 /SH ON 696.00 SHARES DUE 1/ 1/92	348.00		
01/02/92	PURCHASED 348 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 2/92		348.00-	348.00
01/02/92	DIVIDEND ON JOHNSON CTLS INC $ 0.32000 /SH ON 200.00 SHARES DUE 1/ 2/92	64.00		
01/02/92	DIVIDEND ON UNION PAC CORP $ 0.34000 /SH ON 264.00 SHARES DUE 1/ 2/92	89.76		
01/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 12/1/91 TO 12/31/91	881.30		
01/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	75.66-		

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/03/92	PURCHASED 959.4 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 3/92		959.40-	959.40
01/06/92	PURCHASED 38,462.92 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 6/92		38,462.92-	38,462.92
01/08/92	DIVIDEND ON KIMBERLY CLARK CORP $ 0.82000 /SH ON 23,453.00 SHARES DUE 1/ 3/92	19,231.46		
01/08/92	CASH RECEIPT HELMSMAN PRIME FUND ADVISORY FEE REBATE HELMSMAN FEE REBATE FOR 12/91	37.70		
01/08/92	PURCHASED 37.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 8/92		37.70-	37.70
01/09/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11041793200 PAYMENT TO BENEFICIARY	148.00-		
01/09/92	SOLD 19,231.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/ 9/92		19,231.46	19,231.46-
[illegible]	RECEIVED 400 SH NATIONSBANK CORP NAME CHANGE FROM NCNB CORP COMMON			8,767.00

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
01/09/92	DISTRIBUTED 400 SH NCNB CORP NAME CHANGE TO NATIONSBANK CORP COMMON			8,767.00-
01/10/92	SOLD 148 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/10/92		148.00	148.00-
01/22/92	DIVIDEND ON SANTA FE ENERGY RES INC $ 0.04000 /SH ON 60.00 SHARES DUE 1/22/92	2.40		
01/23/92	PURCHASED 2.4 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/23/92		2.40-	2.40
01/24/92	DIVIDEND ON CPC INTL INC $ 0.55000 /SH ON 132.00 SHARES DUE 1/24/92	72.60		
01/27/92	PURCHASED 72.6 DOLLARS HELMSMAN PRIME FUND TRADE DATE 1/27/92		72.60-	72.60
02/03/92	DIVIDEND ON AMERICAN TEL & TELEG CO $ 0.33000 /SH ON 567.00 SHARES DUE 2/ 1/92	187.11		

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TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/03/92	PURCHASED 187.11 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 3/92		187.11-	187.11
02/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 1/1/92 TO 1/31/92	748.04		
02/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	68.16-		
02/04/92	PURCHASED 679.88 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/ 4/92		679.88-	679.88
02/10/92	DIVIDEND ON UNOCAL CORP $ 0.17500 /SH ON 524.00 SHARES DUE 2/10/92	91.70		
02/11/92	PURCHASED 91.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/11/92		91.70-	91.70
02/18/92	DIVIDEND ON CENTERIOR ENERGY CORP $ 0.40000 /SH ON 164.00 SHARES DUE 2/15/92	65.60		
02/18/92	DIVIDEND ON CHASE MANHATTAN CORP $ 0.30000 /SH ON 132.00 SHARES DUE 2/15/92	39.60		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
02/18/92	DIVIDEND ON FIRSTAR CORP NEW $ 0.36000 /SH ON 400.00 SHARES DUE 2/15/92	144.00		
02/18/92	PURCHASED 249.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 2/18/92		249.20-	249.20
03/02/92	DIVIDEND ON BORDEN INC $ 0.28500 /SH ON 792.00 SHARES DUE 3/ 2/92	225.72		
03/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 2/1/92 TO 2/29/92	650.03		
03/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	64.64-		
03/03/92	PURCHASED 811.11 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 3/92		811.11-	811.11
03/06/92	DIVIDEND ON SOUTHERN CO $ 0.55000 /SH ON 200.00 SHARES DUE 3/ 6/92	110.00		
03/06/92	2 FOR 1 STOCK SPLIT GENERAL MTRS CORP CL E 224.00 ADDITIONAL SHARES RECEIVED			

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
03/09/92	PURCHASED 110 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/ 9/92		110.00-	110.00
03/11/92	DIVIDEND ON GENERAL MTRS CORP CL E $ 0.18000 /SH ON 224.00 SHARES DUE 3/10/92	40.32		
03/12/92	PURCHASED 40.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/12/92		40.32-	40.32
03/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 3/23/92	1,060.61-		
03/24/92	SOLD 1,060.61 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/24/92		1,060.61	1,060.61-
03/27/92	DIVIDEND ON NATIONSBANK CORP $ 0.37000 /SH ON 400.00 SHARES DUE 3/27/92	148.00		
03/30/92	PURCHASED 148 DOLLARS HELMSMAN PRIME FUND TRADE DATE 3/30/92		148.00-	148.00
03/31/92	DIVIDEND ON JOHNSON CTLS INC $ 0.32000 /SH ON 200.00 SHARES DUE 3/31/92	64.00		

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/01/92	PURCHASED 64 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 1/92		64.00-	64.00
04/01/92	DIVIDEND ON FIRST CHICAGO CORP $ 0.30000 /SH ON 696.00 SHARES DUE 4/ 1/92	208.80		
04/01/92	DIVIDEND ON UNION PAC CORP $ 0.34000 /SH ON 264.00 SHARES DUE 4/ 1/92	89.76		
04/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 3/1/92 TO 3/31/92	664.63		
04/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	69.34-		
04/02/92	PURCHASED 893.85 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 2/92		893.85-	893.85
04/02/92	DIVIDEND ON KIMBERLY CLARK CORP $ 0.41000 /SH ON 46,906.00 SHARES DUE 4/ 2/92	19,231.46		

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F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/03/92	PURCHASED 19,231.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/ 3/92		19,231.46-	19,231.46
04/22/92	DIVIDEND ON SANTA FE ENERGY RES INC $ 0.04000 /SH ON 60.00 SHARES DUE 4/22/92	2.40		
04/23/92	PURCHASED 2.4 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/23/92		2.40-	2.40
04/24/92	DIVIDEND ON CPC INTL INC $ 0.30000 /SH ON 132.00 SHARES DUE 4/24/92	39.60		
04/24/92	2 FOR 1 STOCK SPLIT CPC INTL INC 132.00 ADDITIONAL SHARES RECEIVED			
04/27/92	DIVIDEND ON CPC INTL INC ON SPLIT SHRS AT $.30/SH	39.60		
04/27/92	PURCHASED 39.6 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/27/92		39.60-	39.60

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TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
04/28/92	PURCHASED 39.6 DOLLARS HELMSMAN PRIME FUND TRADE DATE 4/28/92		39.60-	39.60
05/01/92	DIVIDEND ON AMERICAN TEL & TELEG CO $ 0.33000 /SH ON 567.00 SHARES DUE 5/ 1/92	187.11		
05/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 4/1/92 TO 4/30/92	685.27		
05/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	73.07-		
05/04/92	PURCHASED 799.31 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/ 4/92		799.31-	799.31
05/11/92	DIVIDEND ON UNOCAL CORP $ 0.17500 /SH ON 524.00 SHARES DUE 5/11/92	91.70		
05/12/92	PURCHASED 91.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/12/92		91.70-	91.70
05/15/92	DIVIDEND ON CENTERIOR ENERGY CORP $ 0.40000 /SH ON 164.00 SHARES DUE 5/15/92	65.60		

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F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
05/15/92	DIVIDEND ON CHASE MANHATTAN CORP $ 0.30000 /SH ON 132.00 SHARES DUE 5/15/92	39.60		
05/15/92	DIVIDEND ON FIRSTAR CORP NEW $ 0.40000 /SH ON 400.00 SHARES DUE 5/15/92	160.00		
05/18/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11010999099 FID INC TAX PREPARATION FEE TO BANK ONE WIS TRUST COMPANY	225.00-		
05/18/92	PURCHASED 40.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 5/18/92		40.20-	40.20
06/01/92	DIVIDEND ON BORDEN INC $ 0.30000 /SH ON 792.00 SHARES DUE 6/ 1/92	237.60		
06/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 5/1/92 TO 5/31/92	680.79		
06/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	76.23-		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/02/92	PURCHASED 842.16 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 2/92		842.16-	842.16
06/08/92	DIVIDEND ON SOUTHERN CO $ 0.55000 /SH ON 200.00 SHARES DUE 6/ 6/92	110.00		
06/08/92	PURCHASED 110 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/ 8/92		110.00-	110.00
06/10/92	DIVIDEND ON GENERAL MTRS CORP CL E $ 0.09000 /SH ON 448.00 SHARES DUE 6/10/92	40.32		
06/11/92	PURCHASED 40.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/11/92		40.32-	40.32
06/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 6/23/92	1,147.06-		
06/24/92	SOLD 1,147.06 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/24/92		1,147.06	1,147.06-
06/26/92	DIVIDEND ON NATIONSBANK CORP $ 0.37000 /SH ON 400.00 SHARES DUE 6/26/92	148.00		

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
06/29/92	PURCHASED 148 DOLLARS HELMSMAN PRIME FUND TRADE DATE 6/29/92		148.00-	148.00
06/30/92	DIVIDEND ON JOHNSON CTLS INC $ 0.32000 /SH ON 200.00 SHARES DUE 6/30/92	64.00		
07/01/92	PURCHASED 64 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 1/92		64.00-	64.00
07/01/92	DIVIDEND ON FIRST CHICAGO CORP $ 0.30000 /SH ON 696.00 SHARES DUE 7/ 1/92	208.80		
07/01/92	DIVIDEND ON UNION PAC CORP $ 0.34000 /SH ON 264.00 SHARES DUE 7/ 1/92	89.76		
07/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 6/1/92 TO 6/30/92	646.47		
07/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	74.02-		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/02/92	PURCHASED 871.01 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 2/92		871.01-	871.01
07/02/92	DIVIDEND ON KIMBERLY CLARK CORP $ 0.41000 /SH ON 46,906.00 SHARES DUE 7/ 2/92	19,231.46		
07/06/92	PURCHASED 19,231.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/ 6/92		19,231.46-	19,231.46
07/22/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11041793200 PAYMENT FOR BENEFICIARY	50,000.00-		
07/22/92	DIVIDEND ON SANTA FE ENERGY RES INC $ 0.04000 /SH ON 60.00 SHARES DUE 7/22/92	2.40		
07/23/92	SOLD 49,997.6 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/23/92		49,997.60	49,997.60-
07/24/92	DIVIDEND ON CPC INTL INC $ 0.30000 /SH ON 264.00 SHARES DUE 7/24/92	79.20		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
07/27/92	PURCHASED 79.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 7/27/92		79.20-	79.20
08/03/92	DIVIDEND ON AMERICAN TEL & TELEG CO $ 0.33000 /SH ON 567.00 SHARES DUE 8/ 1/92	187.11		
08/03/92	PURCHASED 187.11 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 3/92		187.11-	187.11
08/03/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 7/1/92 TO 7/31/92	652.24		
08/03/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	77.12-		
08/04/92	PURCHASED 575.12 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/ 4/92		575.12-	575.12
08/10/92	DIVIDEND ON UNOCAL CORP $ 0.17500 /SH ON 524.00 SHARES DUE 8/10/92	91.70		

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
08/11/92	PURCHASED 91.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/11/92		91.70-	91.70
08/17/92	DIVIDEND ON CENTERIOR ENERGY CORP $ 0.40000 /SH ON 164.00 SHARES DUE 8/15/92	65.60		
08/17/92	DIVIDEND ON CHASE MANHATTAN CORP $ 0.30000 /SH ON 132.00 SHARES DUE 8/15/92	39.60		
08/17/92	DIVIDEND ON FIRSTAR CORP NEW $ 0.40000 /SH ON 400.00 SHARES DUE 8/15/92	160.00		
08/17/92	PURCHASED 265.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 8/17/92		265.20-	265.20
09/01/92	DIVIDEND ON BORDEN INC $ 0.30000 /SH ON 792.00 SHARES DUE 9/ 1/92	237.60		
09/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 8/1/92 TO 8/31/92	531.89		
09/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	66.49-		

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/02/92	PURCHASED 703 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 2/92		703.00-	703.00
09/08/92	DIVIDEND ON SOUTHERN CO $ 0.55000 /SH ON 200.00 SHARES DUE 9/ 5/92	110.00		
09/08/92	PURCHASED 110 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/ 8/92		110.00-	110.00
09/10/92	DIVIDEND ON GENERAL MTRS CORP CL E $ 0.09000 /SH ON 448.00 SHARES DUE 9/10/92	40.32		
09/11/92	PURCHASED 40.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/11/92		40.32-	40.32
09/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 9/23/92	1,089.61-		
09/24/92	SOLD 1,089.61 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/24/92		1,089.61	1,089.61-
09/25/92	DIVIDEND ON NATIONSBANK CORP $ 0.37000 /SH ON 400.00 SHARES DUE 9/25/92	148.00		

3675

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
09/28/92	PURCHASED 148 DOLLARS HELMSMAN PRIME FUND TRADE DATE 9/28/92		148.00-	148.00
09/30/92	DIVIDEND ON JOHNSON CTLS INC $ 0.32000 /SH ON 200.00 SHARES DUE 9/30/92	64.00		
09/30/92	2 FOR 1 STOCK SPLIT FIRSTAR CORP NEW 400.00 ADDITIONAL SHARES RECEIVED			
10/01/92	PURCHASED 64 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 1/92		64.00-	64.00
10/01/92	DIVIDEND ON FIRST CHICAGO CORP $ 0.30000 /SH ON 696.00 SHARES DUE10/ 1/92	208.80		
10/01/92	DIVIDEND ON UNION PAC CORP $ 0.37000 /SH ON 264.00 SHARES DUE10/ 1/92	97.68		
10/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 9/1/92 TO 9/30/92	492.49		
10/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	64.72-		

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/02/92	PURCHASED 734.25 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 2/92		734.25-	734.25
10/02/92	DIVIDEND ON KIMBERLY CLARK CORP $ 0.41000 /SH ON 46,906.00 SHARES DUE10/ 2/92	19,231.46		
10/05/92	PURCHASED 19,231.46 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/ 5/92		19,231.46-	19,231.46
10/21/92	DIVIDEND ON SANTA FE ENERGY RES INC $ 0.04000 /SH ON 60.00 SHARES DUE10/21/92	2.40		
10/22/92	PURCHASED 2.4 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/22/92		2.40-	2.40
10/22/92	RECEIVED 42 SH EXCEL TECHNOLOGY INC RCVD IN MERGER WITH QUANTRONIX CORP			710.13
10/22/92	RECEIVED 99 SH EXCEL TECHNOLOGY INC 9/30/97 RCVD IN MERGER WITH QUANTRONIX CORP			0.00
10/22/92	DISTRIBUTED 99 SH QUANTRONIX CORP IN MERGER RCV 42 EXCEL COMM & 99 EXCEL WTS			710.13-

3677

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
10/23/92	DIVIDEND ON CPC INTL INC $ 0.30000 /SH ON 264.00 SHARES DUE10/23/92	79.20		
10/26/92	PURCHASED 79.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 10/26/92		79.20-	79.20
11/02/92	DIVIDEND ON AMERICAN TEL & TELEG CO $ 0.33000 /SH ON 567.00 SHARES DUE11/ 2/92	187.11		
11/02/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 10/1/92 TO 10/31/92	558.36		
11/02/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	72.62-		
11/03/92	PURCHASED 672.85 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/ 3/92		672.85-	672.85
11/10/92	DIVIDEND ON UNOCAL CORP $ 0.17500 /SH ON 524.00 SHARES DUE11/10/92	91.70		

F JAMES SENSENBRENNER JR-TTEE

12/31/91 THROUGH 12/31/92

ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
11/12/92	PURCHASED 91.7 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/12/92		91.70-	91.70
11/16/92	DIVIDEND ON CENTERIOR ENERGY CORP $ 0.40000 /SH ON 164.00 SHARES DUE11/15/92	65.60		
11/16/92	DIVIDEND ON CHASE MANHATTAN CORP $ 0.30000 /SH ON 132.00 SHARES DUE11/15/92	39.60		
11/16/92	DIVIDEND ON FIRSTAR CORP NEW $ 0.22000 /SH ON 800.00 SHARES DUE11/15/92	176.00		
11/16/92	PURCHASED 281.2 DOLLARS HELMSMAN PRIME FUND TRADE DATE 11/16/92		281.20-	281.20
11/17/92	RECEIVED 1 SH EXCEL TECHNOLOGY INC FRL SHS ROUNDED UP ON QUANTRONIX MERGER			0.00
12/01/92	DIVIDEND ON BORDEN INC $ 0.30000 /SH ON 792.00 SHARES DUE12/ 1/92	237.60		
12/01/92	DIVIDEND ON SANTA FE PAC CORP $ 0.10000 /SH ON 201.00 SHARES DUE12/ 1/92	20.10		

3679

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/01/92	INCOME HELMSMAN PRIME FUND INTEREST FROM 11/1/92 TO 11/30/92	546.74		
12/01/92	AUTOMATED CASH MANAGEMENT SVCS HELMSMAN PRIME FUND CASH MGT CHG: HELMSMAN PRIME FUND	71.38-		
12/02/92	PURCHASED 733.06 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 2/92		733.06-	733.06
12/07/92	DIVIDEND ON SOUTHERN CO $ 0.55000 /SH ON 200.00 SHARES DUE12/ 5/92	110.00		
12/07/92	PURCHASED 110 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 7/92		110.00-	110.00
12/08/92	CASH DISBURSEMENT PAID TO F JAMES SENSENBRENNER JR FEE TO OTHER FIDUCIARY BY DEPOSIT TO CHECKING ACCT #0046-2366	15,000.00-		
12/08/92	SOLD 15,000 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/ 8/92		15,000.00	15,000.00-
12/10/92	DIVIDEND ON GENERAL MTRS CORP CL E $ 0.09000 /SH ON 448.00 SHARES DUE12/10/92	40.32		

3680

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
12/11/92	PURCHASED 40.32 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/11/92		40.32-	40.32
12/23/92	CASH DISBURSEMENT PAID TO FOLEY & LARDNER ADMINISTRATIVE EXPENSE PROFESSIONAL SERVICES RENDERED FROM 12/1/91 THROUGH 11/30/92, ACCT #18423-102 40	500.00-		
12/23/92	DIVIDEND ON NATIONSBANK CORP $ 0.40000 /SH ON 400.00 SHARES DUE12/23/92	160.00		
12/24/92	TRUSTEE FEE FOR THE PERIOD THROUGH 12/23/92	1,183.57-		
12/24/92	SOLD 1,523.57 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/24/92		1,523.57	1,523.57-
12/31/92	CASH DISBURSEMENT PAID TO ACCOUNT # 11041793200 PAYMENT FOR BENEFICIARY	19,899.59-		
12/31/92	SOLD 19,899.59 DOLLARS HELMSMAN PRIME FUND TRADE DATE 12/31/92		19,899.59	19,899.59-
12/31/92	ENDING BALANCES	0.00	0.00	1,637,169.85

TRANSACTION DETAIL

F JAMES SENSENBRENNER JR-TTEE 12/31/91 THROUGH 12/31/92 ACCOUNT NUMBER 11040911400

DATE POSTED	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS AT TAX COST
	INCOME CASH + PRINCIPAL CASH = NET CASH			
	0.00 0.00 0.00			

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR-TTEE

SUMMARY OF ASSETS AS OF 12/31/92

ACCOUNT NUMBER: 11040911400

DESCRIPTION	TAX COST	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	YIELD AT MARKET
CASH EQUIVALENTS	180,771.12	180,771.12	5.73	5,766.60	3.19
COMMON STOCK	1,456,398.73	2,974,644.51	94.27	87,009.50	2.93
TOTAL ACCOUNT	1,637,169.85	3,155,415.63	100.00	92,776.10	2.94

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR-TTEE DETAIL OF ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11040911400

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MAT
CASH							
0.00	INCOME CASH	0.00		0.00	0.00		
0.00	PRINCIPAL CASH	0.00		0.00	0.00		
0.00	NET CASH	0.00		0.00	0.00		
CASH EQUIVALENTS							
180,771.12	HELMSMAN PRIME MONEY MARKET PORT	180,771.12	1.00	180,771.12	5.73	5,766.60	3.19
COMMON STOCK							
567	AMERICAN TEL & TELEG CO	12,594.73	51.00	28,917.00	0.92	748.44	2.59
792	BORDEN INC	21,879.00	28.63	22,671.00	0.72	950.40	4.19
50	CATELLUS DEV CORP	749.82	6.75	337.50	0.01	0.00	0.00
164	CENTERIOR ENERGY CORP	2,603.50	19.87	3,259.50	0.10	262.40	8.05
132	CHASE MANHATTAN CORP	3,242.25	28.50	3,762.00	0.12	158.40	4.21
264	CPC INTL INC	6,162.75	50.63	13,365.00	0.42	337.92	2.53
43	EXCEL TECHNOLOGY INC	710.13	2.87	123.63	0.00	0.00	0.00

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR-TTEE DETAIL OF ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11040911400

SHARES PAR VALUE OR UNITS	DESCRIPTION	TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YI TO MAT
696	FIRST CHICAGO CORP	16,834.50	36.75	25,578.00	0.81	835.20	3.27
800	FIRSTAR CORP NEW	9,450.00	31.50	25,200.00	0.80	704.00	2.79
448	GENERAL MTRS CORP CL E	4,480.00	32.88	14,728.00	0.47	179.20	1.22
200	JOHNSON CTLS INC	5,700.00	44.88	8,975.00	0.28	272.00	3.03
46,906	KIMBERLY CLARK CORP	1,333,009.89	59.00	2,767,454.00	87.70	80,678.32	2.92
400	NATIONSBANK CORP	8,767.00	51.38	20,550.00	0.65	640.00	3.11
60	SANTA FE ENERGY RES INC	1,793.10	8.63	517.50	0.02	9.60	1.86
201	SANTA FE PAC CORP	2,167.80	12.88	2,587.88	0.08	20.10	0.78
225	SOUTHEAST BKG CORP	5,315.63	0.50	112.50	0.00	0.00	0.00
200	SOUTHERN CO	4,587.50	38.50	7,700.00	0.24	456.00	5.92
264	UNION PAC CORP	7,656.00	58.50	15,444.00	0.49	390.72	2.53
524	UNOCAL CORP	8,695.13	25.50	13,362.00	0.42	366.80	2.75
TOTAL COMMON STOCK		1,456,398.73		2,974,644.51	94.27	87,009.50	2.93

INVESTMENT REVIEW

F JAMES SENSENBRENNER JR-TTEE DETAIL OF ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11040911400

SHARES PAR VALUE OR UNITS	DESCRIPTION		TAX COST	MARKET PRICE	MARKET VALUE	PERCENT MARKET	ESTIMATED ANNUAL INCOME	CURREN YLD/YL TO MAT
	RIGHTS/WARRENTS/OPTIONS							
99	EXCEL TECHNOLOGY INC WTS	9/30/97	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL RIGHTS/WARRENTS/OPTIONS			0.00		0.00	0.00	0.00	0.00
TOTAL ACCOUNT			1,637,169.85		3,155,415.63	100.00	92,776.10	2.94

F WAMES SENSENBRENNER JR-TTEE DETAIL OF PENDING ASSETS AS OF 12/31/92 ACCOUNT NUMBER: 11040911400

PENDING TRADES: NONE

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

(4)

1993 MAY 17 PM 2:37

U.S. HOUSE OF REPRESENTATIVES

JOSE E. SERRANO
(Full Name)

910 GRAND CONCOURSE
(Mailing Address)

BRONX, NY 10451

Daytime Telephone: 202-225-4361

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District: 16	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

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3688

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature] DATE (Month, Day, Year): 5/17/93

Reporting Individual's Name
JOSE E. SERRANO

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	WRIGHT PATMAN CONGRESSIONAL CREDIT UNION	PERSONAL LOAN	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

JOSÉ E. SERRANO
18TH DISTRICT, NEW YORK

WASHINGTON OFFICE
338 CANNON HOUSE OFFICE BUILDING
WASHINGTON, DC 20515-3218
(202) 225-4361

DISTRICT OFFICE
890 GRAND CONCOURSE
BRONX, NY 10451-2828
(718) 538-5400

HAND DELIVERED

Congress of the United States
House of Representatives
Washington, DC 20515-3216

COMMITTEE
APPROPRIATIONS
SUBCOMMITTEES
LABOR-HEALTH AND HUMAN SERVICES EDUCATION
FOREIGN OPERATIONS, EXPORT FINANCING AND RELATED PROGRAMS

CHAIRMAN, CONGRESSIONAL HISPANIC CAUCUS

ASSOCIATE MEMBER, CONGRESSIONAL BLACK CAUCUS

June 15, 1993

2 ✓
MC

The Honorable Jim McDermott
Chairman
House Committee On Standards of Official Conduct
Suite HT-2, The Capitol
Washington, D.C. 20515

Dear Chairman McDermott:

Please accept the following amendment of my 1992 Financial Disclosure statement:

1. Page 1, second box re: donation to charity in lieu of payment: change "no" to "yes".

2. Append "Schedule II: Payments in Lieu of Honoraria made to Charity" (attached) to my report as Page 1A.

Thank you.

Sincerely,

José E. Serrano
Member of Congress

JES:es

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U.S. HOUSE OF REPRESENTATIVES

JOSE E. SERRANO

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the spouse or dependent child to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2 000
XYZ Magazine	Article	Aug. 13, 1992	$500
National Council of Educational Opportunity Associations Inc.	Speech	5/26/92	$1000

This page may be copied if more space is required.

Schedule II

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(4)

RECEIVED
OFFICE OF PROPERTY & FINANCE MGMT
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mc (Office Use Only)

Philip R. Sharp
(Full Name)

2217 Rayburn H.O.B., Washington, D.C. 20515 — 202/225-3021
(Mailing Address) — Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: IN District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Philip R. Sharp — **DATE (Month, Day, Year)** May 14, 1993

3692

Reporting Individual's Name
Philip R. Sharp

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Aaron Priest Literary Agency 334 E. 51st St., New York, NY 10022	Spouse Royalties	NA
	Sterling Lord Literary Agency 6060 Madison Ave., New York, NY 10021	Spouse Royalties	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
Philip R. Sharp

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Ford Motor Company	Speech	March 19, 1992	$1,000
	Owens/Corning Fiberglass	Speech	March 28, 1992	$2,000
	Brookings Institute	Speech	April 30, 1992	$400
	National Association of Manufacturers	Speech	November 18, 1992	$500

This page may be copied if more space is required.

Reporting Individual's Name: Philip R. Sharp

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT — Examples: S — ABC Corporation Stock				X							X									X							X
George Wash. Credit Union Accounts					X								X									X					
182 Main Street, Dover, Delaware						X						X									X						
House, 2212 Euclid, Muncie, IN				X								X										X					
Wright Patman Federal Credit Union				X									X							X							
IRA Accounts(2) Putnam High Yield Trust II				X							X										X						
U.S. Savings Bond		X																	X								
Farmland, Clark Co., Illinois	I along with my two brothers have a contingent interest in the trust created by my father's will.																										
VitaChlor Corporate Stock				X							X							X									

For additional assets and unearned income, use next page

Reporting Individual's Name

Philip R. Sharp

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

NONE

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				

3696

Reporting Individual's Name
Philip R. Sharp

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Merchants National Bank	Mortgage on 2212 Euclid	X						

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependant child that are totally independant of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Philip R. Sharp

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Enron (Energy & environment discussion with British Government Officials and Industry Leaders. Visit also to energy project at Teesside.)							
		Feb. 11-16	Wash., D.C.-London-Wash.,D.C.	Y	Y	Spouse	N
Democrat National Committee Speech		April 3	Wash., D.C.-Charleston, S.C. -Wash., D.C.	N	Y	None	N

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Reporting Individual's Name
Philip R. Sharp

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization	
Advisory Board	The Indiana Academy for Science, Mathematics, and Humanities	(No Compensation)
Advisory Board	Center for Resource Management	(No Compensation)
Member	National Historical Publications and Records Commission	(No Compensation)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1983 96-635A (ds)

3699

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1993 JUN 17 PM 4: 25
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(10)

MC HAND DELIVERED

(Office Use Only)

The Honorable E. Clay Shaw, Jr.
(Full Name)

2267 Rayburn House Office Building, Washington, D.C. 20515 — 202-225-3026
(Mailing Address) — Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: 22	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL E. Clay Shaw, Jr.	**DATE (Month, Day, Year)** June 15, 1993

3700

Reporting Individual's Name
E. Clay Shaw, Jr.

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other then the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For e spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
E. Clay Shaw, Jr.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Medical Care International, Inc., Palm Beach, Florida	Speech	1/10/92	$1,500
	U.S. Tobacco, Palm Beach, Florida	Invitational/Speech	2/9-2/11/92	$2,000
	National Assoc. of Broadcasters, Turnberry Isle, Fl	Speech	2/15/92	$2,000
	Public Securities Assoc., Phoenix, Arizona	Speech	2/28-3/1/92	$2,000
	Philip Morris Co., Inc., Washington, D.C.	Speech	5/28/92	$2,000
	Coalition Against Regressive Taxation, Washington, D.C.	Speech	7/29/92	$2,000

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Reporting Individual's Name

E. Clay Shaw, Jr.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
	Plant Place, Inc.			X								X												X					
	Dania Farms, Inc.								X			X														X			
	Fort Worth Baain Partnership (worthless)	X																	X										
	Attorney's Title Insurance Fund			X															X										
	Indian River West, Inc. (a Fla. Corp.)				X														X										
	Bay County Bonds			X										X							X								

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: E. Clay Shaw, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H over $1,000,000			DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000 over $1,000,000	
Congressional Federal Credit Union (CD & Checking)			X										X								X						
Nations Bank					X								X										X				
U.S. Treasury Bill							X						X											X			
Crestar		X											X							X							
Blockbusters Enter.		X									X								X								
Merrill-Lynch MIT				X									X										X				
Florida State Broward County Bonds			X										X								X						
Shaw Interstate-Family Partnership-								X				X	X	X										X			
--Timberland located in Sumpter Co.																											
Ala., Lauderdale Co. & Kemper Co., Miss.																											
Nordstrom Inc. Stock		X									X								X								
Chevy Dev. Comp. Stock	X																	X									
Arvida JMB Partnership (value unknown)											X								X								
Real Estate-704 N. Federal Highway								X										X									
(Dania, FL (1/3 interest in 40 acres)																											

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: E. Clay Shaw, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Miami Subs Corp.			X								X								X									
	Polar Molecular Corp.		X																X										
	Home Depot, Inc.				X							X								X									
	Checkers Drive-In Restaurants			X								X								X									

Schedule III – Continuation

Reporting Individual's Name
E. Clay Shaw, Jr.

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Interest in real estate at 704 N. Fed. Hwy., Dania, FL (13± acres)		X		1992					X		
	Archer-Daniels		X		9/23/92		X					
	La. Housing Authority Bonds		X		5/1/92	X						
	La. Housing Authority Bonds		X		3/9/92	X						
	La. Housing Authority Bonds		X		7/31/92	X						
	Checker Drive-in Restaursnts	X			11/24/92	X						
	Home Depot Inc.	X			9/29/92		X					
	U.S. Treasury Bill (Due 5/21/92)	X			2/21/92						X	
	U.S. Treasury Bill (Due 5/21/92)		X		4/21/92			X				
	U.S. Treasury Bill (Due 8/20/92)	X			5/21/92						X	
	U.S. Treasury Bill (Due 2/18/93)	X			8/20/92						X	

3706

Reporting Individual's Name

E. Clay Shaw, Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor ***at any time*** during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

E. Clay Shaw, Jr.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	National Assoc. of Manufacturers Speaking Engagement	1/30-2/1/92	Wash.,D.C.-Ft. Laud.,FL Naples,FL-Ft. L.- D.C.	Y	Y	Spouse	N
	United States Tobacco Charitable Golf Tournament	2/9-2/11/92	Transportation not provided	Y	Y	Spouse	N
	Public Securities Assoc. Speaking Engagement	2/28-3/1/92	Wash., D.C.-Phoeniz-D.C.	Y	Y	Spouse	N
	Electronic Industries Assoc. Speaking Engagement	4/13-4/16/92	Wash., D.C.-Ft. Laud.,FL Captiva,FL-Wash.,D.C.	Y	Y	Spouse	N
	Congressional Charity Golf Tournament, Inc.	11/6-11/8/92	Wash., D.C.-W. Va.- D.C.	Y	Y	Spouse	N

This page may be copied if more space is required.

Reporting Individual's Name
E. Clay Shaw, Jr.

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 56-535A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 12 PM 3:42
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC (8)
HAND DELIVERED
(Office Use Only)

Christopher Shays
(Full Name)

393 Webbs Hill Road
(Mailing Address)

Stamford, Connecticut 06903

Daytime Telephone: 202-225-5541

Filer Status	[X] Member of the U.S. House of Representatives	State: Connecticut District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Christopher Shays

DATE (Month, Day, Year): 5/12/93

3710

Reporting Individual's Name

Christopher Shays

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	New Canaan Board of Education	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Christopher Shays

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
NONE				

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Reporting Individual's Name: Christopher Shays

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used If an asset was sold and is included only because it generated income, the value should be "None"

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						BLOCK C Income: Category of Amount of Income (X)									BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional.			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000	Transaction (X)
S, DC, JT	Examples.	S	ABC Corporation Stock		X								X									X							X
			George Wash. Credit Union Accounts			X									X								X						
			182 Main Street, Dover, Delaware				X							X									X						
DC	First County Bank Stamford, Connecticut				X										X					X									
JT	Citicorp Mortgage Escrow				X										X					X									
S	First County Bank Stamford, Connecticut				X										X						X								
	Congressional Federal Credit Union				X										X					X									
	Connecticut State Employees Retirement System				X														N/A										N/A
S	Connecticut State Teachers Retirement System					X													N/A										N/A

For additional assets and unearned income, use next page

Reporting Individual's Name: Christopher Shays

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	NONE											

Reporting Individual's Name: Christopher Shays

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NONE								

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Reporting Individual's Name

Christopher Shays

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
NONE							

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3716

Reporting Individual's Name
Christopher Shays

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
NONE	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1988 OG-206A (PM)

3717

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 13 PM 2 42

U.S. HOUSE

HAND DELIVERED

MC (10)
(Office Use Only)

KAREN F. SHEPHERD
(Full Name)

P.O. Box 1049
(Mailing Address)

(202) 225-3011
Daytime Telephone

Salt Lake City, Utah 84110

Filer Status	[X] Member of the U.S. House of Representatives	State: Utah District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Karen F. Shepherd

DATE (Month, Day, Year): 5/12/93

3718

Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	University of Utah	Salary	$3,972.91*
	State of Utah	State Senator's Salary	$4,876.76
	* Wage listed on W-2 as Social Security Wage (box 12)		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S	ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X						
	U.S. Treasury Bills and Notes								X						X										X				X
	U.S. EE Bonds						X								X									X					
	Vanguard Federal Portfolio							X					X											X					
	Vanguard 500 Portfolio					X							X			X					X	X							X
	Vanguard Prime Portfolio					X							X									X							
	Vanguard European Portfolio				X								X								X								X

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: KAREN F. SHEPHERD

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000	
	Vanguard Windsor II			X								X			X					X								X
	Vanguard World Fund			X								X			X					X								X
	Scudder Cash Investment Fund				X							X									X							
	Scudder Growth & Income Fund			X								X			X					X								X
	Scudder Global Fund			X								X			X					X								X
	Scudder International Fund			X								X			X					X								X
	Neuberger & Berman Govt. Money				X							X									X							
	Neuberger & Berman Partners			X								X			X					X								
	Neuberger & Berman Genesis			X								X			X					X								X
	Neuberger & Berman Guardian			X								X			X					X								X
	Twentieth Century Cash Reserve				X							X									X							
	Twentieth Century Ultra			X								X			X					X								X
	Twentieth Century Growth			X											X					X								X
	Twentieth Century Select			X								X			X					X								X
	Twentieth Century Heritage			X								X			X					X								X

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: KAREN F. SHEPHERD

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	S Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	BLOCK D Transaction (X)
	Fidelity Spartan U.S. Treasury M. Mkrt						X					X											X						
	Fidelity Spartan U.S. Treasury M. Mkrt			X								X									X								
	Fidelity Cash Reserve Money Market			X								X								X									
	Fidelity Daily Income Trust			X								X								X									
	Fidelity Growth & Income Portfolio			X								X			X					X									
	Fidelity Growth & Income Portfolio			X								X			X					X									
	Fidelity Growth & Income Portfolio			X								X			X					X									
	Fidelity U.S.A. Invest: US T-Notes					X								X										X					
	Clark County Nevada School Bonds				X									X								X							
	District of Columbia Bonds				X									X								X							
	U.S. Treasury Zero Coupon Notes						X							X										X					
	TIAA - CREF Funds					X						X											X						
	Mountain American Bank, SLC, UT				X									X								X							
	First Security Bank, SLC, UT	X												X							X								X
	First Interstate Bank, SLC, UT			X										X						X									

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: KAREN F. SHEPHERD

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset											BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Key Bank of Utah, SLC, UT			X										X						X								
Beehive Credit Union		X											X					X									
Stock, Chevron U.S.A.			X								X								X								
Stock, General Motors			X								X							X									
Stock, Washington Diversified, Tacoma WA			X								X						X										
Stock, Phoenix Center Inc., SLC, UT				X										X						X							X
Rental Units, 1124 E. 100 So., SLC, UT						X						X										X					
Rental Units, 221 E. 2nd Ave. SLC, UT					X							X									X						
Rental Units, 139 "K" St., SLC, UT				X								X									X						
Vacant Land, 55 E. 700 So., Provo, UT			X									X					X										
Art, Wissa Wassef Tapestries		X															X										

Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	U.S. Treasury Bills and Notes	X	X	X	13 trans-actions 1992				X			
	Vanguard 500 Portfolio	X			Quarterly 03/24/92	X						
					04/27/92 04/28/92							
	Vanguard European Portfolio	X			Quarterly 03/27/92	X						
	Vanguard Windsor II	X			Quarterly 04/27/92	X						
	Vanguard World Fund	X			Quarterly 04/27/92	X						
	Scudder Growth and Income Fund	X			Quarterly 04/08/92	X						
					04/27/92							
	Scudder Global Fund	X			Quarterly 03/24/92	X						
					04/27/92							
	Scudder International Fund, Inc.	X			Quarterly 04/08/92	X						
					04/27/92							
	Neuberger & Berman Genesis	X			04/08/92 04/27/92	X						
	Neuberger & Berman Guardian	X			Quarterly 03/24/92	X						
					04/27/92							
	Twentieth Century Ultra	X			04/08/92 04/27/92	X						
	(Continued next page)											

Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Twentieth Century Growth	X			12/19/92 04/08/92	X						
					04/27/92							
	Twentieth Century Select	X			12/19/92 03/24/92	X						
					04/27/92							
	Twentieth Century Heritage	X			12/19/92 04/27/92	X						
	First Security Bank, SLC, UT		X		08/17/92	X						
	Phoenix Center, Inc., Stock		X		02/14/92	X						

Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Zion Mortgage Co., SLC, UT	Mortgage on 1124/1126 E. 100 So. SLC UT			X				
	Standard Federal Savings Bank, Gaithersburg, MD	Mortgage on 221 2nd Ave, SLC UT			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

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Reporting Individual's Name
KAREN F. SHEPHERD

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director	Project 2000/Coalition for Utah's Future

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 28.

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 17 P. 3:59

(7)

HAND DELIVERED
mc
(Office Use Only)

BUD SHUSTER
(Full Name)

Box 234-C,R. D. 3, Everett, Pa. 15537
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Pa District: 9	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Bud Shuster

DATE (Month, Day, Year) May 14, 1993

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Reporting Individual's Name
BUD SHUSTER

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	G $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X								
jt	Shuster Farms							X										farm income						X						
jt	Government Bonds						X							X										X						
	Erie Insurance Co.		X															accident setlment						X						
s	Hercules Tire & Rubber Co.				X									X										X						
jt	Townhouse, Fairlington Arlington, Va.					X							X											X						
jt	Paine Webber Equity Fund					X						X												X						

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: BUD SHUSTER

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
jt	U.S. Pension Fund					X													X										
jt	C 3, Inc. 416 shares stock		X																X										
jt	U.S. Air 36 shares stock		X									X								X									X
jt	~~Nacoma, 1000 shares stock~~		X																X										X
jt	House, Taylor Highlands ~~Huntingdon, Pa.~~					X							X										X						X
jt	Congressional Credit Union			X								X								X									

Schedule III – Continuation

Reporting Individual's Name
BUD SHUSTER

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

B, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	U.S. Air - 36 shares stock		x		5-12-92	x						
JT	Nacoma - 1,000 shares stock		x		10-22-92	x						
JT	House, Taylor Highlands Huntingdon, Pa.	x			6-1-92				x			

Schedule IV

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Reporting Individual's Name
BUD SHUSTER

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Midstate Bank, Altoona, Pa.	Mortgage on house, Taylor Highlands Huntingdon, Pa.			x				
JT	Midstate Bank, Altoona, Pa.	Line of Credit			x				

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

BUD SHUSTER

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Outdoor Advertizing Assn	Jan 24-26	Wash D.C. -Naples, Fla	Y	Y	None	N
Traffic Audit Bureau	Apr 12-13	Wash D.C. - Tuscon, Ariz	Y	Y	None	N
Ackerly Communications	July 18-20	Wash. D.C. - Boston, Mass.	Y	Y	None	1 day
Penn State University	Oct 15	Everett - State College, Pa	Y	Y	None	N
Outdoor Systems, Inc.	Nov 5-7	Wash D.C. - Phoenix, Ariz	Y	Y	None	N
American Bus Assn.	Dec 10-12	Wash D.C. - San Juan, P.R.	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
BUD SHUSTER

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Owner	Shuster Farms, Everett, Pa.

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1982 50-535A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

Norman Sisisky
(Full Name)

2951 South Crater Road
(Mailing Address)

Office: (202) 225-6365
Daytime Telephone

Petersburg, Virginia 23805

Filer Status	[X] Member of the U.S. House of Representatives	State: Virginia District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

43

MAY 17 1993

MC

(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Norman Sisisky

DATE (Month, Day, Year): May 15, 1993

3735

Reporting Individual's Name
Norman Sisisky

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. The column is optional.	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
Assets listed in Schedule III are common stock unless otherwise indicated.																											
S, DC, JT — Examples: S — ABC Corporation Stock			X								X									X							X
George Wash. Credit Union Accounts				X									X									X					
182 Main Street, Dover, Delaware					X							X									X						
Abbott Labs							X				X			X				X					X				X
Coca Cula								X			X			X										X			X
Walt Disney							X				X			X						X		X					X
McDonalds								X			X			X								X		X			X
Merck & Co						X					X			X									X	X			X
Wal-Mart							X				X			X							X		X				X

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
American International Group						X						X			X						X	X							X
American Telephone & Telegraph Co.							X					X											X						X
AMP Inc.					X							X									X								X
Baxter International Inc.					X																								X
CAP Cities/ABC Inc.							X					X								X									
Central Fidelity Banks Inc.					X							X									X								X
Chesapeake Corporation					X							X										X							
Circuit City Stores Inc.							X					X									X								
Cooper Industries Inc.						X						X										X							
Bell Atlantic Corporation		X										X			X						X		X						X
Dow Chemical Co.						X						X											X						
Equitable Resources Inc.							X					X											X						X
Ethyl Corporation						X						X										X							
Exxon Corporation						X						X											X						X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
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S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Federal National Mortgage Assoc.						X					X										X							
	Foster Wheeler Corporation				X							X									X								
	GAP Inc.				X							X							X										X
	General Electric Corporation						X					X											X						
	Liz Claiborne Inc.				X							X									X								X
	MAPCO Inc.				X							X									X								X
	Mobil Corporation					X						X											X						
	NICOR	X										X			X						X	X							X
	Norfolk Southern Corporation				X							X										X							
	Pacific Telesis Group					X						X										X							X
	Philip Morris Companies Inc.					X						X										X							X
	Procter & Gamble Co.					X						X										X							
	Quaker Corporation				X							X									X								
	Schlumberger						X					X										X							
	Syntex Corporation	X										X			X				X			X							X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	United Dominion Realty Trust Inc.						X					X											X						
	Waste Management Inc.					X						X								X									
	Societe Nationale Elf Aquitaine	X										X			X				X				X						X
	JMP Inc.	X													X							X							X
	Caremark International Inc.	X													X					X									X
	Halliburton Co.	X													X								X						X
	Perkin - Elmer Corp.				X																								X
	Muni Fund-Temp Inv. Fund								X					X										X					X
	Alexandria, Va. Redevelopment and Housing Authority; 7.75%, 10/01/2007-96 Bond						X							X									X						
	Chesapeake, Va. Hosp Authority; 7.5%, 07/01/2008-98 Bond						X							X									X						
	Eastern Va Medical Authority General Revenue; 8.125%, 05/15/2007-97 Bond						X							X										X					
	Fairfax County, Va. Redevelopment and Housing; 6.75%, 08/01/95-90 Bond						X							X									X						
	Fairfax County, Va. Redevelopment and Housing; 9.375%, 11/01/94-91 Bond						X							X									X						
	Harrisonburg, Va. Redevelopment and Housing; 9.75%, 11/01/94-91 Bond					X								X								X							
	Peninsula Porta Authority Va. Hosp.; 7.1%, 01/01/2007-94 Bond						X							X									X						

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
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Portsmouth, Va. Pub Imp dtd 11/1/85; 7.25% 11/01/2004-95 Bond					X																	X						
Richmond, Va. Ser A dtd 01/15/88; 7.1%, 01/15/2002-98 Bond					X								X									X						
University Va. Hosp. Revs; 9.5% 12/01-97-96 Bond				X									X									X						
University Va. Hosp. Revs; 8.75% 06/01/2000-95 Bond				X									X									X						
Virginia Beach Va.; 6.9% 10/01/2001-99 Bond					X								X									X						
Virginia Beach Va. Development Authority Rev; 6.5%, 12/01/96-91 Bond					X								X									X						
Virginia Ed. Ln Authority GTD Student; 6.9%, 03/01/95 Bond					X								X									X						
Virginia St HSG Development Authority; 7.2%, 11/01/2022-90 Bond					X								X									X						
Virginia St Transn Brd Transn; 7.8%, 03/01/2016-98 Bond						X							X										X					
Winchester Va. dtd 10/15/89; 6.85%, 10/15/2006-97 Bond					X								X									X						
Winchester Va. LNDC Development Authority; 8%, 01/01/2003-96 Bond						X							X										X					

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

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	Auto Data Processing						X					X			X						X				X				X
	Bausch & Lomb						X					X										X							X
	H&R Block Inc.							X				X											X						X
	Bristol Myers Squibb Co.	X										X			X							X			X				X
	Campbell Soup Co.	X										X			X				X		X								X
	Conagra Inc.	X										X			X						X		X						X
	Equifax Inc.	X										X			X				X		X								X
	Food Lion Inc. Class A	X										X			X				X	X									X
	Gillette Co.							X				X									X								X
	Home Depot Inc.						X					X			X						X				X				X
	Johnson & Johnson							X				X			X				X					X					X
	Kellogg Co.							X				X			X								X	X					X
	Newell Co.						X					X										X							X
	Pepsico Co.									X		X			X				X						X				X
	Pfizer Inc.							X				X			X								X	X					X

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
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	Rubbermaid Inc.							X				X			X							X						X
	State Street Bank Corp. of Boston	X										X			X							X					X	X
	Sysco Corporation							X				X											X					X
	United States Treasury Notes; 8.25% 08/15/92	X												X	X						X		X					X
	Duracell International Inc.	X													X								X					X
	Melville Corporation	X													X								X					X
	Halliburton Co. NFSC		X									X								X								
	Walgreen Co.	X													X									X				X
	Intel Corporation	X													X										X			X
	Ladd Furniture Inc.			X								X							X									
	Nike Inc. Class B				X																							X
	RP Industries Inc. (7)		X									X								X								
	The Richmond Group, Inc.	X																Liquidating Distribution	X									X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
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Black & Decker Corporation	X													X						X							X
Signet Banking Corporation				X							X			X					X			X					X
U.S. Treasury Notes 8.5%, 2/29/92	X												X	X				X			X						X
U.S. Treasury Notes 8.875%, 4/30/92	X												X	X				X			X						X
Citizens & Farmers Bank of West Point, Va.	X													X					X		X						X
Consolidated Stores Corp.	X													X						X							X
On Assignment Inc.	X													X						X							X
Citicorp; $1,217 Dep Shs. Rep. 1/12th sh of conversion PFD Ser 15	X													X						X							X
U.S. Treasury Sec Stripped Interest PMT 0%, 8/15/10	X												X	X				X		X							X
Stein Mart Inc.	X													X								X					X
K/K Realty Holdings Corp - Series A Pfd			X								X									X							X
Brenco Inc. (7)				X							X									X							
U.S. Treasury Notes; 8.625% 5/15/93						X							X									X					

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

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U.S. Treasury Bills 11/05/92	X												X									X					X
General Computer Corporation				X																							X
S&K Famous Brands Inc.				X																							X
U.S. Treasury Bills 10/21/93						X							X					X									X
Advest Bank - Cash Account						X							X							X							
Advest - Brokerage Accounts							X						X							X							
Archer Daniels Midland			X								X			X					X		X						X (Less than $50)
MFS Worldwide Governments Fund						X					X											X					
Doughties Foods Inc.			X								X								X								
Anheuser Busch Cos Inc.						X					X										X						
Signet Bank - Cash accounts (7)						X							X									X					
Metropolitan Life - Dividend Account			X										X							X							
Congressional Federal Credit Union - Cash Accounts							X						X									X					
State Bank of Alleghenes			X							X(2)	X								X								

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	New Dominion Limited Partnership (6)									X	X(1)							Partnership Income									X		
	Assets of New Dominion Limited Partnership:																												
	SBK Select Series MM Fund																												
	Advest MMA and Cash																												
	Scott and Stringfellow - Cash Account																												
	Signet Banking Note 6/1/99																												
	Estate of Celia Brown - Advance																												
	Walt Disney																												
	Melville Corporation																												
	American Express																												
	H&R Block																												
	Benham Certified Metals/Gold																												
	RLI Corporation																												
	Pepsico																												
	Lyondell Petrochemical Co.																												

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $1,000,000	
Assets of New Dominion Limited Partnership:																											
British Petroleum																											
Crystal Brand																											
Auto Data																											
Greater China Fund																											
Merrill Lynch																											
Danskin																											
Richfood Holdings																											
S&K Famous Brands Inc.																											
Aritech Corporation																											
Home Depot																											
American Barrick																											
Israel Bonds																											
Wal-Mart																											
Coca - Cola																											

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Assets of New Dominion Limited Partnership:																										
Time																										
RJR Nabisco Holdings Corp.																										
Reynolds Metals																										
WLR Foods																										
Advest Group																										
Advest/Kemper Clearing Service Commodity Account																										
Gillette																										
Pfizer																										
Alliance Government Reserve Fund																										
McDonald's																										
Rubbermaid																										
Walshire Assurn Co.																										
IBM																										

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Assets of New Dominion Limited Partnership:																											
Sysco																											
General Computer Corp.																											
MFS World Governments Fund																											
Bausch & Lomb																											
First Colony																											
U.S. Treasury Note 4/15/99																											
Roanoke Electric Steel																											
Loews Corp.																											
Sotheby's Holdings																											
Sterling Chemical																											
Bowl American																											
Newell Co.																											
Markel																											
U.S. Treasury Note 8/15/2002																											

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000	
Assets of New Dominion Limited Partnership:																											
U.S. Treasury Bill 2/25/1993																											
Abbott																											
Bally																											
Polak Group Fund Limited Partnership																											
Balanced Spread Fund Limited Partnership																											
Johnson & Johnson																											
American Woodmark Corp.																											
Placer Dome																											
CPC International																											
Kellogg																											
Nike																											
Synalloy Corporation																											
Columbus Avenue Equity Partners, LTD																											
Las Gaviotas Shopping Center, Va Beach, Va, Tenancy-in-Common																											

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Assets of New Dominion Limited Partnership:																													
Gulfstream Partners, LP																													
Cash Value of Life Insurance Policies																													
Las Gaviotas 11.5% Loan 12/31/95																													
Signet Bank - Checking Account																													
Mortgage Note Receivable - Richard L. Sisisky et ux																													
Partner Advances																													
Signet Trust Company - Cash Balance																													

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Norman Sisisky

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $500,000	F $500,001 - $1,000,000	G $1,000,001 - $5,000,000	H over $5,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
The Berkley Venture					X					X(4)							Joint Venture Income	X									
Assets of the Berkley Venture:																											
Cash - Bank of Southside Virginia																											
12.7988 acres unimproved real estate, City of Petersburg, Va.																											
LDC Distributing, Inc. (5)									X	X(1)							"S" Corp Income								X		
Assets of LDC Distributing, Inc.:																											
Cash - Signet Bank																											
Note Receivable - Lee Distributing Company, Inc.																											
Prepayments																											
Lee Distributing Company, Inc. Employees' Pension Plan								X		X(9)								X									
Sini Associates Limited				X						X(8)								X									
Improved Commercial Real Estate Prince George Co., Va (appr. 4 acres)									X	X(3)		X													X		
Improved Commercial Real Estate Blackstone, Va					X					X(3)		X											X				
Virginia Retirement System				X						X(9)								X									

NORMAN SISISKY

NOTES TO ACCOMPANY SCHEDULES III AND IV

(1) Not publicly held - based on entity's year-end book value.

(2) Based on data furnished by the issuer.

(3) Based on assessed value.

(4) The Berkeley Venture is a Virginia partnership investing in unimproved real estate and having its principal place of business in the City of Newport News, Virginia. Valuation reflects underlying book value except as to real estate which is based on assessed values.

(5) LDC Distributing, Inc. is a Virginia Corporation having its principal place of business at 1990 E. Whitehill Road, Prince George County, Virginia.

(6) New Dominion Limited Partnership is a Virginia Limited Partnership having its principal place of business at 1990 E. Whitehill Road, Prince George, Virginia. Transactions in Schedule IV reflect partner's and his spouse's reportable interest therein.

(7) Includes or represents data with respect to holdings as Trustee under the Will of Isadore Brown, deceased.

(8) Sini Associates Ltd. is a limited partnership engaged in real estate activities, having its principal office at 545 Madison Avenue, Suite 800, New York, New York 10022. Currently available valuation data is not definitive; however, the valuation shown is based upon inquiry made of the best known source and is believed to be reasonable.

NOTES TO ACCOMPANY SCHEDULES III AND IV, Continued

(9) As previously reported, the Member is a vested participant in a qualified pension plan (Lee Distributing Company, Inc. Employees' Pension Plan) sponsored by his former employers. Under this plan, the employers made contributions to a qualified pension trust, based generally on participants' compensation. Because the Member, prior to 1985, ceased to be an employee of any contributing employer, no future contributions to such pension plan on behalf of the Member are anticipated.

The Member, through prior service as a member of the Virginia House of Delegates, is entitled to receive, beginning at age 65, a retirement benefit from the Virginia Retirement System.

In each instance, the category of value is based on the latest available actuarial data.

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

Transactions listed in Schedule IV are in common stock unless otherwise indicated.

E, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	American International Group	X			3-23-92		X					
	American Telephone & Telegraph Co.	X			3-03-92		X					
	AMP Inc.	X			5-05-92		X					
	Baxter International Inc.	X			10-02-92		X					
	Central Fidelity Banks Inc.	X			8-10-92		X					
	Equitable Resources Inc.	X			1-22-92		X					
	Equitable Resources Inc.	X			3-27-92		X					
	Exxon Corporation	X			1-22-92		X					
	GAP Inc.	X			6-15-92		X					
	GAP Inc.	X			10-06-92		X					
	Liz Claiborne Inc.	X			2-28-92		X					
	MAPCO Inc.	X			2-14-92		X					
	Pacific Telesis Group	X			11-25-92		X					
	Perkin - Elmer Corporation	X			11-04-92		X					
	Perkin - Elmer Corporation	X			11-04-92		X					
	Philip Morris Companies Inc.	X			3-03-92		X					
	Syntex Corp.	X			3-04-92		X					

Reporting Individual's Name
Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				
	Syntex Corporation	X			6-15-92		X					
	American International Group		X		8-11-92		X					
	Bell Atlantic Corporation		X		11-25-92		X					
	Caremark International Inc.		X		12-31-92	X						
	Coca Cola Co.		X		5-21-92		X					
	Walt Disney Co.		X		6-11-92	X						
	Halliburton Co.		X		1-10-92		X					
	JWP Inc.		X		5-05-92		X					
	NICOR		X		3-27-92		X					
	NICOR		X		6-15-92		X					
	Syntex Corporation		X		12-08-92		X					
	Societe Nationale Elf Aquitaine		X		10-29-92			X				
	Auto Data Processing	X			7-15-92			X				
	Auto Data Processing	X			7-27-92			X				
	Auto Data Processing	X			7-30-92		X					

Reporting Individual's Name

Norman Siaisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Bausch & Lomb	X			5-15-92			X				
	Bausch & Lomb	X			5-22-92			X				
	Bausch & Lomb	X			6-04-92		X					
	Bausch & Lomb	X			9-15-92		X					
	H&R Block Inc.	X			2-25-92				X			
	H&R Block Inc.	X			2-27-92		X					
	H&R Block Inc.	X			3-04-92		X					
	H&R Block Inc.	X			6-19-92		X					
	H&R Block Inc.	X			7-30-92		X					
	Bristol Myers Squibb Co.	X			1-15-92		X					
	Campbell Soup Co.	X			2-20-92			X				
	Campbell Soup Co.	X			2-26-92		x					
	Campbell Soup Co.	X			2-28-92		X					
	Campbell Soup Co.	X			3-06-92		X					
	Coca Cola	X			11-09-92		X					
	Coca Cola	X			12-10-92		X					
	Walt Disney	X			9-01-92				X			

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Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Walt Disney Co.	X			9-15-92	X						
	Walt Disney Co.	X			11-03-92			X				
	Walt Disney Co.	X			11-24-92		X					
	Duracell International Inc.	X			4-21-92		X					
	Duracell International Inc.	X			4-23-92		X					
	Food Lion Inc.	X			2-20-92		X					
	Food Lion Inc.	X			4-28-92			X				
	Gillette Co.	X			9-30-92				X			
	Gillette Co.	X			10-28-92		X					
	Cillette Co.	X			12-14-92			X				
	Gillette Co.	X			12-15-92		X					
	Home Depot Inc.	X			1-27-92			X				
	Home Depot Inc.	X			1-29-92		X					
	Home Depot Inc.	X			1-30-92		X					
	Home Depot Inc.	X			2-27-92		X					
	Home Depot Inc.	X			3-23-92		X					
	Home Depot Inc.	X			4-13-92		X					

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				
	Home Depot Inc.	X			5-11-92		X					
	Johnson & Johnson	X			1-15-92			X				
	Johnson & Johnson	X			5-11-92			X				
	Kellogg Co.	X			5-11-92			X				
	McDonalds Corporation	X			5-11-92	X						
	McDonalds Corporation	X			10-27-92		X					
	McDonalds Corporation	X			11-27-92		X					
	McDonalds Corporation	X			11-30-92		X					
	Melville Corporation	X			1-22-92			X				
	Merck & Co. Inc.	X			3-04-92		X					
	Merck & Co. Inc.	X			3-16-92		X					
	Merck & Co. Inc.	X			5-11-92				X			
	Newell Co.	X			7-24-92			X				
	Newell Co.	X			7-30-92			X				
	Nike Inc. - Class B	X			12-16-92			X				
	Pepsico Inc.	X			1-15-92		X					
	Pepsico Inc.	X			5-11-92		X					

Schedule IV

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Reporting Individual's Name
Norman Sisisky

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 30.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Pfizer Inc.	X			2-27-92		X					
	Pfizer Inc.	X			5-11-92		X					
	Rubbermaid Inc.	X			6-16-92		X					
	Rubbermaid Inc.	X			8-31-92		X					
	Sysco Corporation	X			1-16-92		X					
	Sysco Corporation	X			5-11-92		X					
	Wal-Mart Stores	X			3-04-92			X				
	Wal-Mart Stores	X			5-11-92			X				
	Abbott Labs		X		7-16-92		X					
	Bristol Myers Squibb Co.		X		1-30-92		X					
	Bristol Myers Squibb Co.		X		1-31-92		X					
	Bristol Myers Squibb Co.		X		2-27-92		X					
	Bristol Myers Squibb Co.		X		3-04-92		X					
	Bristol Myers Squibb Co.		X		3-16-92		X					
	Campbell Soup Co.		X		4-13-92				X			
	Coca Cola Co.		X		7-23-92		X					
	Coca Cola Co.		X		9-29-92			X				

Reporting Individual's Name: Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
	Example ABC Corporation Common Stock	X			10-12-92			X				
	Conagra Inc.		X		2-12-92		X					
	Auto Data Processing		X		12-30-92			X				
	Conagra Inc.		X		2-27-92	X						
	Conagra Inc.		X		3-04-92		X					
	Conagra Inc.		X		3-05-92		X					
	Conagra Inc.		X		3-11-92		X					
	Durcell International Inc.		X		6-04-92			X				
	EquiFax Inc.		X		2-24-92			X				
	Food Lion Inc.		X		5-19-92				X			
	Home Depot Inc.		X		11-23-92		X					
	Home Depot Inc.		X		12-28-92		X					
	Intel Corporation		X		1-23-92			X				
	Intel Corporation		X		1-24-92			X				
	Johnson & Johnson		X		9-01-92		X					
	Johnson & Johnson		X		11-23-92		X					
	Kellogg Co.		X		7-24-92		X					

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Kellogg Co.		X		9-02-92			X				
	McDonald's Corporation		X		9-03-92		X					
	Melville Corporation		X		2-24-92			X				
	Merck & Co. Inc.		X		7-16-92			X				
	U.S. Treasury Bills 10/21/93	X			10-29-92				X			
	Merck & Co. Inc.		X		10-27-92		X					
	Merck & Co. Inc.		X		11-05-92		X					
	Merck & Co. Inc.		X		11-16-92		X					
	Merck & Co. Inc.		X		12-02-92				X			
	Pepsico Inc.		X		6-30-92		X					
	Pepsico Inc.		X		7-01-92		X					
	Pfizer Inc.		X		9-01-92		X					
	Pfizer Inc.		X		9-23-92		X					
	Rubbermaid Inc.		X		5-11-92		X					
	State Street Bank Corporation of Boston		X		5-11-92			X				
	State Street Bank Corporation of Boston		X		7-02-92		X					
	State Street Bank Corporation of Boston		X		7-22-92				X			

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Wal-Mart Stores		X		12-10-92			X				
	Walgreen		X		02-21-92				X			
	General Computer Corp.	X			11-13-92		X					
	Muni Fund-Temp Inv. - Net	X			Various				X			
	S&K Famous Brands Inc.	X			12-24-92		X					
	The Richmond Group, Inc. (Liquidating Distribution)		X		10-20-92				X			
	Citizens & Farmers Bank of West Point, Va.	X			03-11-92			X				
	Consolidated Stores	X			08-14-92	X						
	On Assignment	X			09-22-92	X						
	U.S. Treasury Sec Stripped Int Pmt 0% 08/15/10	X			08-13-92		X					
	U.S. Treasury Bills	X			05-06-92				X			
	NPM Healthcare Product	X			11-25-92		X					
	Citicorp Preferred	X			10-15-92	X						
	Stein Mart	X			11-02-92		X					
	Stein Mart	X			10-19-92		X					
	Stein Mart	X			10-07-92		X					
	U.S. Treasury Note 8.25% 8/15/92		X		08-15-92		X					

Schedule IV

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Reporting Individual's Name
Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Black & Decker Corporation		X		1-15-92		X					
	Citicorp		X		1-15-92	X						
	Signet Banking Corp.		X		1-15-92		X					
	U.S. Treasury Notes 8.50%, 2/29/92		X		3-02-92			X				
	U.S. Treasury Notes 8.875%, 4/30/92		X		4-30-92			X				
	Citizens & Farmers Bank of West Point, Va.		X		5-14-92	X						
	Citizens & Farmers Bank of West Point, Va.		X		5-26-92	X						
	Citizens & Farmers Bank of West Point, Va.		X		6-05-92		X					
	Citizens & Farmers Bank of West Point, Va.		X		6-12-92	X						
	Citizens & Farmers Bank of West Point, Va.		X		8-03-92		X					
	McDonalds Corporation		X		6-09-92		X					
	Consolidated Stores Corporation		X		8-28-92	X						
	On Assignment Inc.		X		10-13-92	X						
	Citicorp $1.217 Dep Shs Rep 1/12th sh Convertible PFD		X		11-02-92		X					
	U.S. Treasury Sec Stripped Int PMT 0%, 8/15/10		X		11-18-92		X					
	NPM Health care Products Inc.		X		12-07-92		X					
	Stein Mart Inc.		X		12-17-92			X				

Reporting Individual's Name

Norman Sisisky

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership: (6)											
	Black and Decker Corporation		X		01/15/92		X					
	Signet Banking Corporation		X		01/23/92			X				
	Citizens & Farmers Bank of West Point, Va.		X		04/22/92		X					
	Citizens & Farmers Bank of West Point, Va.		X		04/23/92	X						
	Crestar Financial Corporation		X		04/23/92		X					
	Digital Equipment Corporation		X		04/23/92	X						
	General Cinema Corporation Company		X		04/23/92		X					
	Paramount Communications, Inc.		X		04/23/92		X					
	Citizens & Farmers Bank of West Point, Va.		X		04/27/92	X						
	Citizens & Farmers Bank of West Point, Va.		X		05/04/92	X						
	Citizens & Farmers Bank of West Point, Va.		X		05/08/92	X						
	Citizens & Farmers Bank of West Point, Va.		X		05/14/92	X						
	U.S. Air Inc. 12.875% Bond 4/01		X		07/02/92		X					
	Westinghouse Electric Corp. (V & PD		X		07/02/92	X						
	On Assignment Inc. Company		X		10/13/92	X						
	Citicorp Dep Sh		X		10/15/92		X					

Reporting Individual's Name: Norman Sisisky

SCHEDULE IV – TRANSACTIONS

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Schwab Charles Corp. New		X		11/06/92	X						
	General Motors Corp. Depository		X		11/16/92	X						
	Stein Mart Inc.		X		11/17/92		X					
	Synalloy Corp.		X		11/17/92	X						
	Penril Data Comm Networks Inc. A		X		11/18/92	X						
	U.S. Treasury Sec. Stripped Interest Payment		X		11/18/92		X					
	Synalloy Corp. Company		X		11/24/92		X					
	Advest Group Inc. Company		X		12/03/92	X						
	Consolidated Stores Corporation		X		08/28/92	X						
	American Strategic Inc. Portfolio II		X		11/16/92		X					
	First Israel Fund Inc.		X		11/16/92	X						
	Citicorp 02-12 CCI		X		01/15/92		X					
	Dominion Bankshares Corporation		X		01/23/92	X						
	Signet Banking Corporation		X		01/23/92		X					
	U.S. Treasury Notes 9.125% 2/15/92		X		02/15/92				X			
	Citizens & Farmers Bank of West Point, Va.		X		03/05/92	X						

Reporting Individual's Name

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Citizens & Farmers Bank of West Point, Va.		X		03/10/92	X						
	Citizens & Farmers Bank of West Point, Va.		X		03/11/92	X						
	AT&T Co.		X		04/23/92		X					
	Crestar Financial Corporation		X		04/23/92		X					
	Digital Equipment Corporation		X		04/23/92	X						
	The Dow Chemical Co.		X		04/23/92		X					
	Ethyl Corporation		X		04/23/92	X						
	1st Virginia Bank Inc.		X		04/23/92		X					
	Paramount Communications, Inc.		X		04/23/92		X					
	FHLB 8.375% 7/27/92 Bond		X		07/27/92			X				
	Hanson PIC WT Exp 9/30/94		X		11/16/92	X						
	Genentech Inc.		X		11/19/92		X					
	Hallwood Group Inc. Com. New		X		11/23/92	X						
	Campbell Soup Company		X		04/06/92		X					
	Food Lion Incorporated Class A		X		05/08/92		X					
	Duracell Intl. Inc. Com		X		05/28/92		X					

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Pepsico Inc.		X		06/23/92	X						
	Pepsico Inc.		X		06/24/92	X						
	Northern Trust Corporation		X		01/03/92		X					
	Intel Corporation		X		01/15/92		X					
	Intel Corporation		X		01/16/92		X					
	Bristol Myers Squibb Co.		X		01/23/92	X						
	Bristol Myers Squibb Co.		X		01/24/92	X						
	Conagra Inc.		X		02/05/92		X					
	Melville Corporation		X		02/14/92		X					
	Equifax Inc.		X		02/19/92		X					
	Bristol Myers Squibb Co.		X		02/20/92	X						
	Conagra Inc.		X		02/20/92	X						
	Walgreen Co.		X		02/20/92		X					
	Bristol Myers Squibb Co.		X		02/26/92	X						
	Conagra Inc.		X		02/26/92	X						
	Conagra Inc.		X		02/27/92	X						

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Conagra Inc.		X		03/04/92	X						
	Auto Data Processing		X		12/30/92		X					
	Bristol Myers Squibb Co.		X		03/09/92	X						
	State Street Boston Corp.		X		06/25/92		X					
	State Street Boston Corp.		X		07/15/92		X					
	Pfizer Inc.		X		07/23/92	X						
	General Mills Inc.		X		09/21/92		X					
	General Mills Inc.		X		11/06/92		X					
	Merck & Co. Inc.		X		11/06/92	X						
	Home Depot Inc.		X		11/16/92	X						
	Merck & Co. Inc.		X		11/24/92		X					
	Home Depot Inc.		X		12/18/92		X					
	Coca Cola Co.		X		04/23/92		X					
	Pfizer Inc.		X		08/25/92	X						
	Kellogg Co.		X		08/26/92	X						
	Johnson & Johnson		X		08/28/92	X						

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Kellogg Co.		X		08/28/92	X						
	Merck & Co. Inc.		X		10/29/92	X						
	Kellogg Co.		X		06/30/92	X						
	Abbott Labs		X		07/09/92		X					
	Merck & Co.		X		07/10/92	X						
	State Street Boston Corp.		X		07/15/92		X					
	Coca Cola Co.		X		07/16/92	X						
	Pfizer Inc.		X		09/16/92	X						
	Coca Cola Co.		X		09/22/92		X					
	Merck & Co. Inc.		X		10/20/92	X						
	Merck & Co. Inc.		X		11/06/92	X						
	Johnson & Johnson		X		11/16/92	X						
	Wal-Mart Stores		X		12/03/92		X					
	American Reliance Gp.		X		09/16/92	X						

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	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Walt Disney	X			09/01/92		X					
	Walt Disney	X			09/04/92	X						
	Walt Disney	X			11/03/92		X					
	Walt Disney	X			11/24/92	X						
	Merck & Co. Inc.	X			03/04/92	X						
	Merck & Co. Inc.	X			03/16/92		X					
	Citizens & Farmers Bank of West Point, Va.	X			03/18/92		X					
	Melville Corp.	X			01/22/92		X					
	H&R Block	X			02/25/92		X					
	H&R Block	X			02/27/92	X						
	H&R Block	X			03/04/92	X						
	H&R Block	X			07/30/92	X						
	Penril Data Comm	X			03/11/92	X						
	Penril Data Comm	X			03/19/92	X						
	Campbell Soup Co.	X			02/20/92		X					
	Campbell Soup Co.	X			02/26/92	X						

Reporting Individual's Name
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S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Campbell Soup Co.	X			03/06/92	X						
	Pepsico	X			01/15/92	X						
	Pepsico	X			03/05/92	X						
	Gillette	X			09/30/92		X					
	British Petroleum	X			02/21/92		X					
	British Petroleum	X			08/17/92	X						
	Duracell	X			04/21/92	X						
	Duracell	X			04/23/92	X						
	Auto Data	X			07/16/92		X					
	Auto Data	X			07/30/92	X						
	Auto Data	X			07/27/92	X						
	American Strategic Inc. Portfolio II	X			07/30/92		X					
	Greater China Fund	X			08/25/92	X						
	Merrill Lynch	X			08/24/92	X						
	Schwab Corp	X			08/24/92	X						
	Food Lion	X			02/20/92	X						

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S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Food Lion	X			04/28/92		X					
	Danskin	X			08/26/92	X						
	S&K Famous Brands	X			06/17/92		X					
	S&K Famous Brands	X			11/09/92	X						
	S&K Famous Brands	X			12/02/92	X						
	Aritech Corp.	X			05/21/92	X						
	Home Depot	X			02/27/92	X						
	Home Depot	X			01/31/92	X						
	Home Depot	X			01/29/92	X						
	Home Depot	X			01/27/92		X					
	Home Depot	X			04/13/92	X						
	American Barrick	X			05/27/92		X					
	Bristol Myers	X			01/15/92	X						
	Wal-Mart	X			01/15/92	X						
	Wal-Mart	X			03/04/92		X					
	Coca Cola	X			12/10/92	X						

3772

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	RJR Nabisco	X			08/31/92	X						
	Advest Group	X			10/08/92		X					
	U.S. Treasury Bill	X			04/27/92		X					
	Advest Group	X			10/15/92	X						
	Advest Group	X			10/16/92	X						
	Gillette Co.	X			10/28/92	X						
	Gillette Co.	X			12/14/92		X					
	Pfizer	X			02/27/92		X					
	Pfizer	X			05/11/92	X						
	General Mills	X			07/06/92		X					
	General Mills	X			07/08/92		X					
	Westinghouse	X			06/10/92	X						
	McDonald's	X			10/27/92	X						
	McDonald's	X			11/27/92	X						
	McDonald's	X			12/02/92	X						

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	U.S. Air Inc. 12.875% Bond 4/01	X			06/23/92		X					
	Rubbermaid	X			08/31/92	X						
	Consolidated Stores	X			08/21/92	X						
	Stein Mart	X			10/07/92		X					
	First Israel Fund	X			10/29/92	X						
	On Assignment Inc.	X			09/30/92	X						
	Citicorp	X			10/22/92		X					
	Sysco	X			08/27/92	X						
	Sysco	X			01/10/92	X						
	Sysco	X			01/16/92	X						
	General Computer Co.	X			11/13/92		X					
	MFS World Governments Fund	X			06/16/92			X				
	Bausch & Lomb	X			05/15/92		X					
	Bausch & Lomb	X			06/04/92		X					
	First Colony	X			12/15/92	X						
	Signet Financial Corp. 8.85% Note	X			07/28/92		X					

Reporting Individual's Name
Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

B, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	U.S. Treasury Note 04/15/99	X			04/15/92		X					
	Newell Co.	X			07/24/92		X					
	Markel	X			02/27/92		X					
	Markel	X			06/02/92	X						
	Markel	X			06/08/92	X						
	Markel	X			07/09/92		X					
	Markel	X			08/18/92		X					
	U.S. Treasury Note 8/15/2002	X			08/19/92		X					
	Johnson & Johnson	X			08/19/92		X					
	American Woodmark Corp.	X			03/13/92	X						
	Placer Dome	X			08/25/92	X						
	U.S. Treasury Bill 8/27/92	X			04/27/92		X					
	Nike Inc.	X			12/16/92	X						
	Gulfstream Partners LP	X			06/30/92		X					
	U.S. Treasury Bill 2/25/93	X			08/27/92		X					
	U.S. Treasury Note 8/15/2010	X			08/20/92				X			

Reporting Individual's Name

Norman Sisisky

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Transactions of New Dominion Limited Partnership:											
	Signet Financial Corp. 8.8% Note	X			06/23/92		X					
	Sotheby's Holdings	X			10/01/92	X						
	Partners' Advances Repaid - Net			X	Various		X					
	Mortgage Note of Richard L. Sisisky et ux	X			12/15/92					X		
	Signet PC 8.8% Note		X		07/27/92		X					
	Signet PC 8.85% Note		X		08/28/93		X					
	Las Gaviotas Shopping Center; Tenants-In-Common (Additional Investments)	X			Various	X						
	Las Gaviotas Shopping Center; 11.5% Loan 12/31/95 (Principal Collections)			X	Various	X						

Schedule IV

Reporting Individual's Name
Norman Sisisky

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Joint Venturer	The Berkeley Venture
Limited Partner	New Dominion Limited Partnership
Limited Partner	Sini Associates Ltd.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 28.

Date	Parties To	Terms of Agreement
	See Note (9) to Schedules III and IV hereof.	

GPO: 1992 50-636A (ps)

3777

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(9)

David Evans Skaggs
(Full Name)

1124 Longworth House Office Building — 202/225-2161
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Colorado District: Second	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED

mc (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL David E Skaggs

DATE (Month, Day, Year) May 17, 1993

3778

Reporting Individual's Name
David Evans Skaggs

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	National Trust for Historic Preservation	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II

70-599 O - 92 - 29

Reporting Individual's Name
David Evans Skaggs

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Brookings Institution	Speech	Feb. 24, 1992	$400
Brookings Institution	Speech	Jul. 14, 1992	$400
Brookings Institution	Speech	Nov. 17, 1992	$400

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Reporting Individual's Name
David Evans Skaggs

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None."

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	Dean Witter IRA																														
	DW Liquid Account			X									X								X									X
	Capital Grown SCC				X											X						X								X
	Air Methods Corp.			X																X										
	Unit Sears Equity List 8		X													X						X								X
	Exabyte Corp.				X															X										X
	Storage Technology Corp.				X															X										X
	Somatogen Inc.				X															X										X

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: David Evans Skaggs

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S	Kemper Growth Fund, IRA			x											x					x										
S	Investment Co. Amer IRA			x											x						x									
S	Grace Petro. Corp.				x							x						Royalty				x								
S	Bank of Boulder, savings			x										x					x											

Schedule III – Continuation

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Reporting Individual's Name: David Evans Skaggs

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Dean Witter IRA											
	Dean Witter Sears Liquid Asset Fund	X	X		various	X						
	Dean Witter Capital Growth Sec	X	X		various	X						
	Storage Technology Common Stock	X			12/24/92	X						
	Unit Sears Equity List 8		X		various	X						
	Exabyte Corp. common stock	X			10/01/92	X						
	Somatogen Inc. common stock	X			4/02/92	X						

3783

Reporting Individual's Name

David Evans Skaggs

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Schedules V and VI

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Reporting Individual's Name
David Evans Skaggs

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Princeton University- Woodrow Wilson School of Public Affairs	Jan. 20 1992	Washington, D.C.- Princeton, N.J. Roundtrip railroad travel	N	Y	None	

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Reporting Individual's Name
David Evans Skaggs

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Wesleyan University

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

3786

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

JOSEPH RICHARD SKEEN
(Full Name)

2367 RAYBURN HOB
(Mailing Address)

(202)225-2365
Daytime Telephone

WASHINGTON, D.C. 20515

Filer Statue	[X] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date: ____

(6)

HAND DELIVERED

(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Joe Skeen

DATE (Month, Day, Year) 5-11-93

3787

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: JOSEPH RICHARD SKEEN

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	
JT	#7 DEBORAH DR. - ROSWELL, NM					X							X							X								
	OIL & GAS-WORKING INTEREST (5%)	X															OIL & GAS SALES	X										
	WRIGHT PATMAN CREDIT UNION			X								X								X								
JT	REAL ESTATE-RUIDOSO, NM			X								UNDEVELOPED PROPERTY (NOT INCOME PRODUCING)																
JT	REAL ESTATE- 6-MILE HILL ROSWELL, NM			X								UNDEVELOPED PROPERTY (NOT INCOME PRODUCING)																
JT	FARM CREDIT SERVICES-STOCK			X										X					X									
	COMMON STOCK-UNITED NM BANK		X									X							X									
S	RC JONES TRUST- NOTE RECEIVABLE				X									X	X					X	X							
S	COMMON STOCK - BRISTOL MYERS		X									X							X									
S	COMMON STOCK - UNC RES., INC.		X									X							X									
S	COMMON STOCK - PAN-AMER. CORP.		X									X							X									
S	COMMON STOCK - SEAGULL ENERGY CORP.		X									X							X									

Schedule III – Continuation

Reporting Individual's Name

JOSEPH RICHARD SKEEN

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X									X
		George Wash. Credit Union Accounts				X									X										X						
		182 Main Street, Dover, Delaware					X							X									X								
	FIDELITY BANKERS LIFE-DEFERRED (Paine-Webber) ANNUITY			X											X						X									
	FIDELITY & GUARANTY LIFE-DEFFERED (Paine-Webber) ANNUITY			X											X						X									
	PUERTO RICO COMMWELTH HWAY - (Paine-Webber) MUNICIPAL BOND		X										X								X									
	ALLIED CAPITOL COMMERCE - COMMON (Paine-Webber) STOCK			X									X								X									
JT	RANCH-TO INCLUDE 15,000 ACRES, LAND, IMPROVEMENTS&LIVESTOCK -(58% HOLDING)								X										RANCH INCOME	X (NET)								X (GROSS)		
	PICACHO, NM - LINCOLN, COUNTY																														

For additional assets and unearned income, use next page

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Reporting Individual's Name

JOSEPH RICHARD SKEEN

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	(Paine Webber) PUERTO RICO COMMWELTH HWAY - MUNICIPAL BOND		X		7-1-92	X						
	(Paine Webber) ALLIED CAPITOL COMMERCE - COMMON STOCK - BETHSEDA, MD.	X			7-31-92	X						

Schedule IV

Reporting Individual's Name

JOSEPH RICHARD SKEEN

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	FARM CREDIT SERVICES - ROSWELL, NM	MORTGAGE ON RANCH - PICACHO, NM LINCOLN, COUNTY					X		
JT	ROSWELL ESCROW CO.- REAL ESTATE- #7 DEBORAH DR. ROSWELL, NM.	MORTGAGE ON ROSWELL PROPERTY		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

JOSEPH RICHARD SKEEN

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	SPOUSE ONLY						
	MARY SKEEN - NEW MEXICO STATE UNIVERSITY - COUNCIL MEMBER - ~~COUNCIL FOR AGRICULTURE RESEARCH~~ EXTENSION & TRAINING (CARET)	JULY 19-23	PICACHO,NM - MONTERREY, CA - PICACHO,NM	Y	Y	NONE	N
			WESTERN CARET MEETING				
	SPOUSE ONLY	NOV. 6-9	PICACHO,NM - NEW ORLEANS,LA -	Y	Y	NONE	N
	MARY SKEEN		PICACHO,NM NATIONAL CARET MEETING				

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 17 PM 4:17

Ike N. Skelton
(Full Name)

2227 Rayburn Houae Office Building
(Mailing Address)

(202) 225-2876
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: Missouri, District: Fourth	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED

9

MC

(Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from the report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** May 17, 1993

Reporting Individual's Name

Ike Skelton

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Missouri State Retirement System	State Senate for 6 years	$2880.00

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

Ike Skelton

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	The Tobacco Institute	Speech	Feb. 25, 1992	$2000.00

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Reporting Individual's Name

Ike Skelton

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	B	ABC Corporation Stock			X								X									X									X
			George Wash. Credit Union Accounts				X									X									X							
			182 Main Street, Dover, Delaware						X						X									X								
S	Trust, Virginia B. Anding Estate, United Missouri Bank, Kansas City, MO																															
	Assets:																															
	- United Missouri Bank Common Stock Fund																															
	- United Missouri Bank Common Tax Exempt Fund																															
	- United Missouri Bank Common Taxable Fixed Income Fund														X		X									X						
	TOTAL ASSETS: $237,464.00								X																							
	Trust, Carolyn B. Skelton Estate, Commerce Bank, Kansas City, MO																															
	Assets:																															
	- Farmland (1/3 Interest in 121 acres Lafayette County, MO)																															
	- Commerce Bank Tax Free Bond Funds																															
	- Commerce Bank Institutional Liquid Assets Tax-Exempt													X	X	X										X						
	TOTAL ASSETS: $145,914.00								X																							

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ike Skelton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)							Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST			I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000		
S	Sun Oil Company, mineral rights UST&T			X									X									X								
	Omyx Energy Co. (formerly Sun Oil Company)																													
S	Fractional Interest in Store Building in Delhi, LA		X										X							X										
JT	Note & Contract for sale to Lafayette County Bankshares Inc., Lafayette County Bank, Lexington, MO ($105,860 payable over 10 years)					X								X											X					
JT	Lafayette County Bankshares *** Interest + Principle Paid/Due																													
	1) Dan Hagen			X										X	(+Principle)							NONE								
	2) Bryce Quarter Horses			X										X	(+Principle)							X								
	3) Goodloe Construction	X										(Principle Only)											X							
	4) Robert Long	X										(Principle Only)												X						
	*** Formerly included in note and contract sale																													
	*** Indicates 6.3% Joint ownership of total asset (Susie Skelton 1.6% + Ike Skelton 4.7%)																													

Reporting Individual's Name: Ike Skelton

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				

Schedule IV

Reporting Individual's Name
Ike Skelton

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Lafayette County Bank, Lexington, Missouri	Open Note		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Ike Skelton

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days

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Reporting Individual's Name
Ike Skelton

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Iks Skelton, Sr. Memorial Trial Practice Award (University of Missouri School of Law)
Trustee	Ike Skelton, Sr. Outstanding Junior Sigma Chi Award (Xi Xi Chapter, University of Missouri)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1993 80-535A (25)

3801

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

93 MAY 13 PM 3:19

James C. Slattery (Full Name)	
2243 Rayburn House Office Building (Mailing Address)	202-225-6601 (Daytime Telephone)
Washington, D.C. 20515	
Filer Status	[X] Member of the U.S. House of Representatives — State Kansas, District Second; [ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date

MC (8)

HAND DELIVERED

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Jim Slattery	**DATE (Month, Day, Year)** 5/13/93

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Reporting Individual's Name
James C. Slattery

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	International Foundation	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
James C. Slattery

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb 2, 1992	$2,000
XYZ Magazine	Article	Aug 13, 1992	$500
Domestic Petroleum Council	Speech	April 2, 1992	$2,000.00
Petroleum Marketers Association of America	Panel Participant	April 6, 1992	$500.00
Steel Manufacturers Association	Speech	April 28, 1992	$2,000.00
American Council On Education	Speech	May 20, 1992	$1,000.00

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Reporting Individual's Name
Jamea C. Slattery

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
DC	Capitol Federal Savings					X									X							X							
JT	Highland Park Bank					X									X						X								
JT	Kanaas Credit Union			X											X						X								
JT	Sovran Bank Aocounts, VA.					X									X						X								
JT	Holton State Bank(IRA)					X										NA								NA					
S	Congreasional Federal Credit Union Accounts			X											X						X								

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James C. Slattery

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
JT	Real Estate,Atchison,Ks.-farm land approx.100 acres					X											None	X										
JT	Real Estate 5724 Foxcroft Circle North,Topeka,Ks.					X							X									X						
JT	Real Estate-office,bldg. 3300 W.6th,Topeka,Ks.					X							X										X					
JT	Real Estate 619 Taylor,Topeka,Ks.(2/3 interest)						X						X											X				
JT	Real Estate 2620 Central Park,Topeka,Ks.				X								X									X						
JT	Real Estate 2408 Moundview,Topeka,Ks.				X								X									X						
JT	Real Estate 535 Oakley,Topeka,Ks.				X								X									X						
JT	Real Estate 2309 Moundview,Topeka,Ks.				X								X									X						
JT	Real Estate 2405 W.24th,Topeka,Ks.				X								X									X						
JT	Real Estate 805 Saline,Topeka,Ks.				X								X									X						

Reporting Individual's Name
James C. Slattery

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Bank IV	Real Estate Mortgages			X				
JT	Capitol Federal Savings	Real Estate Mortgages			X				
JT	Highland Park Bank	Real Estate Loan				X			
JT	Fidelity State Bank	Real Estate Laon	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Jamse C. Slattery

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
The Urban Institute. (The Urban Institute Roundtable	Feb.13-16'92	Wash.,DC-Ft.Lauderdale-Wash.,DC	Y	Y	Spouse	N
On Children's Issues/Panel(s) participant)						
U.S. Telephone Association (USTA Telco-Leadership Roundtable,	April 21-27'92	Wash.,DC-Orlando-Wash.,DC	Y	Y	Spouse	four days
speech)						
Kansas Chiropractic Association (tour Logan Chiropractic College	Nov.5,1992	KCI-St.Louis-Wash.,DC	N	Y	NONE	N
& luncheon mtg.)						
Ivy Inter-American Foundation (Humanitarian mission to children's	May9-13'92	Wash.,DC-Managua,Nicaragua-Wash.,DC	Y	Y	SPOUSE ONLY	N
hospitals, orphanages, refugee camps in Nicaragua to deliver donations.						
Approved by Standards Of Official Conduct Committee letter 4-21-92.)						

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3808

Reporting Individual's Name
James C. Slattery

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Keystone Energy Board Member	Keystone Center

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 50-534A (pb)

3809

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(Full Name) Louise M. Slaughter

(Mailing Address) 14 Manor Hill Drive Daytime Telephone 716 223 7519

Fairport New York 14450

HAND DELIVERED

7

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District: 28	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

mc (Office Use Only)

3810

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Louise M. Slaughter

DATE (Month, Day, Year) May 17, 1993

Reporting Individual's Name
Louise M. Slaughter

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of New York	Pension for Assembly Service	7,264
	Eastman Kodak Company	Spouse Consultant Income	NA

For payments to charity in lieu of honoraria, use Schedule II

Page 1 of 1

Schedule I

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Louise M Slaughter

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
		Year End Value (X)										Type of Income (X)						Category of Amount of Income (X)											
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
	Procter & Gamble Stock			X								X								X									
	Clorox Stock		X									X							X										
JT	Oppenheimer Special Fund		X									X								X									
JT	Fidelity Daily Income Trust (Money Market Savings)			X								X									X								
JT	Primerica Stock		X									X							X										
JT	Marine Midland Savings		X											X					X										
JT	Congressional Federal Credit Union Savings		X											X					X										
	Retirement Accounts																												
	IRA - Fidelity Growth Income Fund		X															NA											
	IRA - Fidelity Retirement Growth Fund		X															NA											
	IRA Vanguard Trustees Commingled Equity Fund			X														NA											
S	IRA - Fidelity Growth & Income Fund		X															NA											
S	IRA - Fidelity Retirement Growth Fund		X															NA											

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Louise M. Slaughter

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	IRA - Mutual Qualified Fund				X													NA											
S	401 K - Eastman Kodak Co. Savings Investment Plan						X											NA											
S	Fidelity Magellan Fund				X													NA											
S	Fidelity Growth Company Fund				X													NA											
S	Fidelity Growth & Income Portfolio					X												NA											
S	Mutual Qualified Fund					X												NA											
	Eastman Kodak Company - Employee Stock Ownership Plan Trust	X										X			X							X							X

Schedule III – Continuation

Reporting Individual's Name
Louise M. Slaughter

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Fidelity Magellan Fund	X			2/92		X					
S	Fidelity Growth Company Fund	X			2/92		X					
S	Fidelity Growth & Income Portfolio	X			2/92			X				
S	Mutual Qualified Fund	X			2/92			X				
	Eastman Kodak Company - Employee Stock Ownership Plan Trust		X		2/92	X						

Reporting Individual's Name
Louise M. Slaughter

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	SHARE Self Help for Women with Breast Cancer	May 7	Wash, D.C. - NYC - Wash, DC	N	Y	None	N
	National Federation of Democratic Women	May 21-May 24	Wash, D.C. - Louisville, KY - Rochester, NY	Y	Y	None	3 days
	Chicago Mercantile Board	June 14-June 15	[illegible] NY - Chicago, IL - Wash, DC	Y	Y	None	N
	American Association of Women Podiatrists	August 21	Roch, NY - NYC - Roch, NY	N	Y	None	N
	Women's Press Club of NY State	October 21-22	Roch, NY - Albany, NY - Roch, NY	N	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
Louise M Slaughter

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
National Spokesperson	Strang Cancer Prevention/ National High Risk Registry

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 28.

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

CHRISTOPHER H. SMITH, M.C.
(Full Name)

74 Tynemouth Court
(Mailing Address)

Robbinsville, New Jersey 08691-9354

Daytime Telephone: (609)890-2800

Filer Status: [X] Member of the U.S. House of Representatives — State: New Jersey, District: 4th; [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date:

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(Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	[ ]	[X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	[ ]	[X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	[X]	[ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	[X]	[ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	[X]	[ ]
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	[X]	[ ]
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	[ ]	[X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	[ ]	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Christopher H. Smith

DATE (Month, Day, Year) 5-17-93

Reporting Individual's Name

CHRISTOPHER H. SMITH, M.C.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X									X									X
George Wash. Credit Union Accounts				X									X									X							
182 Main Street, Dover, Delaware					X							X									X								
JT — Vanguard Mutual Funds (GNMA)	X										X								X										X
Chesterbrook Complex 1200 Morris Drive Wayne, PA 19087																													
JT — Puerto Rico Electric Power Authority Muni. Bond (Paine Webber, Princeton, NJ)			X										X							X									

For additional assets and unearned income, use next page

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Reporting Individual's Name
CHRISTOPHER H. SMITH, M.C.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Janus Mutual Funds																												
	P.O. Box 173375																												
	Denver, CO 80217																												
JT	Janus Twenty			X	(Two	thousand)						X								X									X
DC	Janus Twenty			X	(Two	thousand)						X								X									X
DC	Janus Twenty			X	(Two	thousand)						X								X									X
DC	Janus Twenty			X	(Two	thousand)						X								X									X
DC	Janus Twenty			X	(Two	thousand)						X								X									X
DC	Certificate Accrual Treasury			X										X							X								
	Securities																												
DC	" " " "			X										X							X								
DC	" " " "			X										X							X								
DC	" " " "			X										X							X								
JT	Congressional Federal Credit			X										X							X								
	Union																												

Reporting Individual's Name

CHRISTOPHER H. SMITH, M.C.

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	Vanguard Mutual Funds (GNMA)		X		1-20-92	X	(Nine thousand)					
	Chesterbrook Complex 1200 Morris Drive Wayne, PA 19087											
JT	Janus Mutual Funds (Janus Twenty)	X			1-31-92	X	(Two thousand)					
	P.O. Box 173375 Denver, CO 80217											
DC	Janus Twenty	X			1-31-92	X	(Two thousand)					
DC	Janus Twenty	X			1-31-92	X	(Two thousand)					
DC	Janus Twenty	X			1-31-92	X	(Two thousand)					
DC	Janus Twenty	X			1-31-92	X	(Two thousand)					

Schedule IV

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Reporting Individual's Name
CHRISTOPHER H. SMITH, M.C.

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25

Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
ABC Corporation	Aug. 8-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
Nebraska Right to Life	Jan. 24-25	Wash., D.C. - Lincoln - Wash., D.C.	Y	Y	None	
New York State Right to Life	Apr. 4	D.C.-Rochester-D.C.	N	Y	None	
Kentucky Right to Life	May 8-9	D.C.-Louisville-D.C.	Y	Y	None	
Ohio Right to Life	Sept. 18	D.C.-Akron-D.C.	N	Y	None	

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Reporting Individual's Name
CHRISTOPHER H. SMITH, M.C.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Member, Board of Directors	Americans United For Life Legal Defense Fund

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 50-524A (pc)

3822

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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1993 MAY 17 PM 3:58

U.S. HOUSE OF REPRESENTATIVES

(B)

HAND DELIVERED
(Office Use Only)

Lamar Seeligson Smith
(Full Name)

2443 Rayburn H.O.B. — (Mailing Address)
202 225-4236 — Daytime Telephone:

Filer Status	[X] Member of the U.S. House of Representatives — State: TX District: 21 st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	X	No		
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes		No	X	
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	X	No		
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	X	No		
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	X	No		
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes		No	X	
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes		No	X	
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes		No	X	
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes		No	X	
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.					

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes		No	X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes		No	X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Lamar Smith — DATE (Month, Day, Year): 5/17/93

3823

Reporting Individual's Name

Lamar Seeligson Smith

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Principia College (Jan-May)	spouse salary	
	Elsah, Illinois		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name

Lamar Seeligson Smith

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples: B ABC Corporation Stock			X								X							X
	George Wash Credit Union Accounts				X									X					
	182 Main Street, Dover, Delaware					X							X						
	Life Tenant, undivided (25%) surface and mineral interest of Lamar Seeligson Ranch, Premont, TX								X				X					royalties	
	Partnership Interest, Lamar Seeligson Ranch				X													sale of crops, surface lease	

BLOCK C Income: Category of Amount of Income (X)										
	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
Examples: B ABC Corporation Stock			X							
George Wash Credit Union Accounts					X					
182 Main Street, Dover, Delaware				X						
Life Tenant, undivided (25%) surface and mineral interest of Lamar Seeligson Ranch, Premont, TX									X	
Partnership Interest, Lamar Seeligson Ranch						X				

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Lamar Seeligson Smith

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.																												
	Proctor Gamble			X								X								X									
	Southwest Airlines			X								X									X								
	First American Bank, Washington, D.C.		X											X						X									
	Wright Patman Federal Credit Union		X											X							X								
	* STOCKS OWNED BY MY DEPENDENT CHILDREN I HAVE A LIFE INTEREST IN DIVIDENDS ONLY.				*																								
DC	National Financial Services money market account										*			X									X						
DC	National Bancshares Corp.	X									*	X							X										
DC	AT&T										*	X								X									
DC	Pacific Telesis										*	X								X									
DC	Bell Atlantic										*	X								X									
DC	Amer. Exp. Co.										*	X								X									
DC	NYNEX										*	X								X									
DC	US WEST										*	X								X									

Schedule III—Continuation

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Lamar Seeligson Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	ALSO HELD BY MY DEPENDENT CHILDREN:																											
DC	Oak Forest--Joint Venture				X														X									
	(undeveloped land in Bandera County																											
DC	Vista-Joint Venture				X													partial sale of property					X					

Schedule III – Continuation

Reporting Individual's Name

Lamar Seeligson Smith

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Proctor Gamble		X		11-27-92	X						
	Southwest Airlines		X		11-20-92	X						

3828

Reporting Individual's Name

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Lamar Seeligson Smith

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner	Lamar Seeligson Ranch

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 O-206A (20)

3830

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 PM 12: 22

(9)

HAND DELIVERED

MC

(Office Use Only)

Neal Smith
(Full Name)

7504 N.E. 12th Ave., Altoona, Iowa 50009
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Iowa District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

TRUSTS – Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION – Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Neal Smith	**DATE (Month, Day, Year)** May 13, 1993

3831

Reporting Individual's Name

Neal Smith

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Gross income from farming (husband & wife).		
	Although not subject to the limitation, net return would be		
	less than the limitation. This figure also includes the		
	income representing return on farming land and other		
	investments.		48,500
	Executor's Fee (spouse)		N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3832

Reporting Individual's Name

Neal Smith

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	None			

This page may be copied if more space is required.

Reporting Individual's Name
Neal Smith

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT Examples: S	ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X								
JT	Firstar Bank				X													X			X									
S	New York Life Ins.				X													X				X								
JT	1st Fla. Bank			X														X			X									

Bank Acct Pd. up Ins

For additional assets and unearned income, use next page

Schedule III

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Neal Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Share of Farm Belt, Inc.																												
	(Family Farming Corp.)									X																			
S	Share of Romack Farms Ltd.																												
	(Iowa Family Farm Corp.)								X																				
JT	Farm operation including land,																												
	equipment, and related property																												
	in Iowa including home and																												
	improvements (see Sched. I)									X																			
JT	L. Robinson (house contract)				X									X	X							X							
	WP Credit Union				X									X							X								

Reporting Individual's Name

Neal Smith

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	Exchanged Farm Land for Farm Land			X					X			
JT	Purchased Farm Land	X							X			

3836

Reporting Individual's Name: Neal Smith

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	R. Stubbs	Contract on Farm Real Estate				X			
JT	Firstar Bank	Business Line of Credit and							
		overdraft protection			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Reporting Individual's Name

Neal Smith

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
None							

This page may be copied if more space is required.

Reporting Individual's Name
Neal Smith

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Consultant Representative	Farm Belt (Family Farm Corp.)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO 1988 88-534A (pb)

3839

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1993 MAY 26 PM 3:30
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
9
HAND DELIVERED
MC
(Office Use Only)

Neal Smith
(Full Name)

7504 N.E. 12th Ave., Altoona, Iowa 50009
(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: Iowa District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	X	No		
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes		No	X	
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	X	No		
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	X	No		
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	X	No		
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes		No	X	
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes		No	X	
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes	X	No		
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes		No	X	

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes		No	X
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes		No	X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Neal Smith

DATE (Month, Day, Year) May 26, 1993

3840

Reporting Individual's Name

Neal Smith

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Gross income from farming (husband & wife).		
	Although not subject to the limitation, net return would be		
	less than the limitation. This figure also includes the		
	income representing return on farming land and other		
	investments.		48,500
	Executor's Fee (spouse)		N/A

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Neal Smith

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	None			

This page may be copied if more space is required.

Reporting Individual's Name
Neal Smith

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
JT	Firstar Bank					X													X			X								
S	New York Life Ins.					X													X				X							
JT	1st Fla. Bank				X														X			X								

For additional assets and unearned income, use next page

3843

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting individual's name: Neal Smith

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Share of Farm Belt, Inc.																											
	(Family Farming Corp.)									X																		
S	Share of Romack Farms Ltd.																											
	(Iowa Family Farm Corp.)								X																			
JT	Farm operation including land,																											
	equipment, and related property																											
	in Iowa including home and																											
	improvements (see Sched. I)									X																		
JT	L. Robinson (house contract)				X									X	X							X						
	WP Credit Union				X									X						X								

Schedule III—Continuation

3844

Reporting Individual's Name

Neal Smith

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO. DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	Exchanged Farm Land for Farm Land (The same trans-											
	action exchanged 80 acres in Polk County, Iowa for											
	part of a 230 acre farm in Polk County, Iowa and pur-											
	chased the balance of the acreage.)			X	3-4-5/92				X			
JT	Purchased Farm Land	X			same dates				X			

Reporting Individual's Name: Neal Smith

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X): B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	R. Stubbs (He is the owner of the farm								
	land involved in the exchange								
	identified in Schedule IV).	Contract on Farm Real Estate				X			
JT	Firstar Bank	Business Line of Credit and							
		overdraft protection			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Neal Smith

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
None							

This page may be copied if more space is required.

3847

Neal Smith

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Consultant Representative	Farm Belt (Family Farm Corp.)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO: 1982 86-535A (m)

3848

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

'93 MAY 14 AM 11: 12
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(4)

MAY 1 3

MC

(Office Use Only)

NICK SMITH ROOM 1708
(Full Name)

12780 Addison Rd 202-225-6276
(Mailing Address) Daytime Telephone

Addison MI 49220

Filer Status	[X] Member of the U.S. House of Representatives	State: MICH. District: 07	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Nick Smith

DATE (Month, Day, Year): 5/7/93

3849

Reporting Individual's Name
NICK SMITH

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	STATE of Michigan	Legislative Salary	$45,450
	Addison Mich FARM	FARM EARNINGS	$27,320

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3850

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: NICK SMITH

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	$201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
SOCIETY BANK - Addison Mi	JT		X											X						X									
STATE of Mich, BOND	JT				X									X									X						
MERRILL LYNCH I.R.A. ACT	S		X									X			X				X										
MERRILL LYNCH I.R.A. ACT			X									X			X				X										
MERRILL LYNCH CASH MGT ACT	JT		X											X							X								
EATON VANCE TRUST	JT		X									X		X	X						X								
A.G. EDWARDS CASH MGT. ACT.	JT			X										X								X							
MICH PUBLIC POWER (BOND)	JT			X										X									X						
CITY of GRAND RAPIDS (BOND) (MI)	JT			X										X								X							
MICH PUBLIC POWER (BOND)	JT					X								X										X					
C.B. FINANCIAL CORP	JT		X									X			X					X									X
CONVERSE TECHNOLOGY INC	JT		X									X			X				X										X
OLD KENT FINANCIAL CORP	JT			X								X			X						X								X
JACKSON CITY BANK & TRUST	JT					X								X										X					X
FARM - Addison Mich	JT								X									FARMING VACANT LOT							X				
CALF. PROPERTY	JT		X																X										

Reporting Individual's Name
NICK SMITH

SCHEDULE IV – TRANSACTIONS

Report any purchases, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	C.B. FINANCIAL CORP.	X			1-20-92	X						
JT	CONVERSE TECHNOLOGY INC.	X			10-6-92	X						
JT	OLD KENT FINANCIAL CORP	X			1-9-92		X					
JT	JACKSON City BANK - MANAGED TRUST Act/INVESTMENTS BOUGHT & SOLD BY TRUST DEPT											

3852

93 JUN 10 AM 7:48

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Congressman Nick Smith
~~700 C Washington~~
~~Suite 210-C~~
Addison 49220
~~Jackson~~, Michigan ~~49201~~

JUN 5 1993

✓
MC (5)

Comm on Standards of Official Conduct
U S HS of Representatives

Enclosed is additional information as requested May 21 letter from Chief Counsel Parmo

Nick Smith
M.C.

Paid for by Nick Smith for Congress Committee, David Lambert, Treasurer, Hillsdale, Michigan 49242

Merrill Lynch
Pierce, Fenner & Smith Inc.
Member, Securities Investor Protection Corporation (SIPC)

Statement of Retirement Account

ACCOUNT #	F/C #	PAGE #	SOCIAL SEC. #
686 75485	6275	1	379-38-1882
STATEMENT PERIOD 09/26/92 TO 12/31/92			EIN NUMBER 00-0000000
FINANCIAL CONSULTANT ARLINGTON R ASH (517) 342-9339		ACCOUNT TYPE IRA	
OFFICE SERVING YOUR ACCOUNT ONE MICHIGAN AVE SUITE 100 LANSING MI 48933			YR PLAN EST 1986

MLPF& S CUST FPO
NICHOLAS H SMITH IRA
FBO NICHOLAS H SMITH
1278 ADDISON ROAD
ADDISON MI 49220

** 49220-0000

am Atch # 1

***** SUMMARY OF YOUR IRA PLAN *****

VALUATION OF PRICED PORTFOLIO		DIVIDEND/INTEREST	
AS OF 12/31/91. . . .	$1,963.38	THIS PERIOD	$2.74CR
AS OF 12/31/92. . . .	$1,884.79	THIS YEAR	$10.41CR

***** CONTRIBUTION INFORMATION *****

TAX YEAR 1991	TAX YEAR 1992
$.00	$.00

***** DISTRIBUTION INFORMATION *****

TAX YEAR 1991	TAX YEAR 1992
$.00	$.00

***** MONEY ACCOUNT QUARTERLY DIVIDEND/INTEREST RECAP *****

MONEY ACCOUNT	OCTOBER	NOVEMBER	DECEMBER	CURRENT MONTH'S EFFECTIVE YIELD
ML RETIREMENT RESERVES	$1.03	$.74	$.97	2.94

***** YOUR DAILY ACCOUNT ACTIVITY *****

DATE	TRANSACTION	DESCRIPTION	PRICE	AMOUNT
09 26	OPENING BALANCE			$.42CR
11 16	FEE	1992 CUSTODIAL FEE		$35.00
11 17	REDEEMED	35 ML RETIRMT RESERVES		$35.00CR
11 17	RECEIVED	35 ML RETIRMT RESERVES		
12 31	CLOSING BALANCE			$.42CR

***** YOUR INVESTMENTS *****

INVESTMENTS IN YOUR ACCOUNT	CURRENT PRICE	MARKET VALUE	CURR. YIELD	EST. INCOME
2 ML VENTURE PTNR II LP 87	775.000	$1550		
TOTAL MARKET VALUE OF PRICED INVESTMENTS		$1550		

MONEY ACCT POSITIONS @ $1.00 PER SHARE	OPENING BALANCE AS OF 09/26	CLOSING BALANCE AS OF 12/31	DIVIDENDS/INTEREST THIS PERIOD	DIVIDENDS/INTEREST YEAR TO DATE
ML RETIREMENT RESERVES	$366.63	$334.37	$2.74	$10.41

-000005000

DECEMBER, 1992

Please advise your Financial Consultant immediately of any discrepancies on your statement or if you contemplate changing your address. When making inquiries, please mention your account number and address of correspondence to the office servicing your account. Please retain this statement for your tax records. See reverse side for explanation of key terms.

CODE 5029 (REV 10-92)

Merrill Lynch

JOINT CONSOLIDATED ANNUAL TAX BILL

1992 | 1992

CITIES, COUNTY, SCHOOLS AND ALL OTHER TAXING AGENCIES IN LOS ANGELES COUNTY
SECURED PROPERTY TAX FOR FISCAL YEAR JULY 1, 1992 TO JUNE 30, 1993
SANDRA M. DAVIS TREASURER AND TAX COLLECTOR

COUNTY OF LOS ANGELES

OWNER OF RECORD AS OF MARCH 1, 1992
SAME AS BELOW

3218 003 011
SMITH,NICHOLAS
MAPLE DR FARMS
ADDISON MICH
49220-0000

PROPERTY LOCATION AND / OR PROPERTY DESCRIPTION
FIFTH STREET STORE TRACT
LOT 11 BLK 55

ACCOUNT NO	PRINT NO	REG	DIVISION INDEX BATCH NO	ASSESSOR'S ID NO Year	Seq. No.	Map Book	Page	Parcel	TRA
13200	117455	A1		92	000	3218	003	011	09610

ROLL YEAR 92-93	CURRENT ASSESSED VALUE		TAXABLE VALUE
LAND	1380		1380
IMPROVEMENTS			
FIXTURES			
		TOTAL	1380
		LESS EXEMPTION	
		NET TAXABLE VALUE	1380

DETAIL OF TAXES DUE	RATE	AMOUNT
GENERAL TAX LEVY		
ALL AGENCIES	1.000000	13.80
VOTED INDEBTEDNESS		
COUNTY	.001409	.02
SPECIAL WATER	.096463	1.33
ELEM SCHOOLS	.025409	.35
FIRST INSTALLMENT TAXES DUE		7.75
SECOND INSTALLMENT TAXES DUE		7.75
TOTAL TAXES DUE		15.50

BEFORE CALLING A COUNTY OFFICE
SEE REVERSE SIDE FOR
IMPORTANT TAXPAYER INFORMATION

THERE WILL BE A $49.05 SERVICE CHARGE FOR ANY CHECK RETURNED BY THE BANK.
KEEP THIS UPPER PORTION FOR YOUR RECORDS — YOUR CANCELLED CHECK IS YOUR RECEIPT

3855

1

LIST OF ASSETS
FOR ACCOUNT # 446633, NICHOLAS A AND BONNALYN A SMITH/CUST IN PRINCIPAL PORTFOLIO
ACCT TYPE: INDIVIDUAL CUSTODIAN CAP: CUSTODIAN INV AUTH: SHARED-NO CTF
PREPARED AT 11:54 AM ON 1/4/93 AS OF BATCH DATE 1/4/93 WITH ASSET PRICES AS OF 12/31/92 ADM: 2 MGR: 10

SHRS/PV/UNITS	ASSET DESCRIPTION	MARKET VAL	BOOK VALUE	FED TAX	STATE TAX	PROJECTED ANNUAL INC
	CASH EQUIVALENTS					
137124.2100	GOLDMAN ILA - T/E DIV GOLDMAN SACHS-INSTITUTIONAL LIQUID ASSETS - TAX EXEMPT DIVERSIFIED PORTFOLIO	137124	137124.21	137124	137124	4223
	SUBTOTALS	137124	137124.21	137124	137124	4223
	INVESTMENTS	137124	137124.21	137124	137124	4223
	CASH ON HAND	-54207	-54207.38	-54207	-54207	
	TOTALS	82917	82916.83	82917	82917	4223

CASH NOT INCLUDED ABOVE

INCOME 54208.80

***ACCOUNT #446633 HAS BEEN OVERDRAWN IN
PRINCIPAL PORTFOLIO 95 DAYS,
1ST OVERDRAFT WAS 10/1/92 ***

MAY NET TO COVER OVERDRAFTS

Atch #3
Jackson City Bank
Jackson Michigan

3856

TRANSACTION SUMMARY FOR
446633 42/ 11 2/ 10 NICHOLAS A AND BONNALYN A SMITH/CUST 12/1/92 -TODAY

DATE	DESCRIPTION	INCOME CASH	PRINCIPAL CASH	INVESTMENTS	PAGE 1
11/30/92	BALANCES CARRIED FORWARD	53927.35	-53925.38	136842.21	
12/02/92	CASH RECEIPT OF INTEREST EARNED ON GOLDMAN ILA - T/E DIV INTEREST FROM 11/1/92 TO 11/30/92 TAXABLE TO STATE ONLY BATCH NO. ZY000011, TRANS NO. 929	281.45			
12/02/92	PURCHASED 282 UNITS OF GOLDMAN ILA - T/E DIV TRADE DATE 12/2/92 TAXABLE TO STATE ONLY BATCH NO. ZY000016 TRANS NO. 564		-282.00	282.00	
12/31/92	BALANCES CARRIED FORWARD	54208.80	-54207.38	137124.21	

3857

Atch #3
Jackson City Board
Mtg. 1/4/93

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 AM 10:06

(7)

HAND DELIVERED

MC

(Office Use Only)

Robert F. Smith
(Full Name)

108 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202-225-6730

Filer Status	[X] Member of the U.S. House of Representatives	State: Oregon District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[ ] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependant child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

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SIGNATURE OF REPORTING INDIVIDUAL
X [signature]

DATE (Month, Day, Year)
May 13, 1993

3858

Reporting Individual's Name
Robert F. Smith

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	UST, Greenwich, Conn.	Appearance	Feb. 9, 1992	$2000
	The Smokeless Tobacco Council, Washington, D.C.	Appearance	May 26, 1992	$1000

This page may be copied if more space is required.

Reporting Individual's Name
Robert F. Smith

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X									X
			George Wash. Credit Union Accounts				X								X									X							
			182 Main Street, Dover, Delaware					X						X									X								
	Ranch property near Burns, OR										X			X												X					
	Ranch house at HC7151 Lone Pine Rd., Burns							X						X		X								X	X						X
	Wilburn Bldg., Broadway St., Burns					X								X											X						
	Tiller Bldg., Broadway St., Burns				X									X									X								

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name: Robert F. Smith

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Ranch house at HC 71 51, Lone Pine Rd., Burns		X		8-26-92				X			
	Timber on ranch property		X		9-9-92		X					

3861

Reporting Individual's Name
Robert F. Smith

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Farm Credit Bank, Spokane, WA	Mortgage on ranch property near Burns				X			
	Key Bank, Portland, OR	Mortgage on Tiller and Wilburn							
		buildings in Burns		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

38862

Reporting Individual's Name
Robert F. Smith

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Chinese Nat'l Assoc. of Industry	Jan. 8-11	Wash. DC - Taipei - Wash. DC via Hawaii	Y	Y	Spouse	N
	Hawaiian Sugar Planters' Assoc.	Jan. 12-14		Y	Y	Spouse	N
	Nat'l Cattlemen's Assoc.	Jan 23-27	Wash. DC - San Diego - Wash. DC	Y	Y	Spouse	N
	UST, Greenwich, Conn.	Feb. 9-11	Wash. DC - Palm Beach, FL - Wash. DC	Y	Y	Spouse	N
	American Assoc. Crop Insurers	Feb. 22-24	Wash. DC - San Antonio, TX - Wash. DC	Y	Y	Spouse	N
	American Medical Assoc.	Feb. 27 - March 1	Wash. DC - Palm Beach, FL - Wash. DC	Y	Y	Spouse	N
	Coastal Corp.	March 13-15	Wash. DC - Wyoming - Wash. DC	Y	Y	None	N
	Dairymen, Inc.	April 30 - May 3	Wash. DC - Louisville, KY - Wash. DC	Y	Y	Spouse	N
	Chinese Nat'l Assoc. of Industry	Nov. 28 - Dec. 5	Wash. DC - Taipei - Wash. DC	Y	Y	Spouse	N

This page may be copied if more space is required.

Reporting Individual's Name
Robert F. Smith

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Willamette University (Salem, OR) Board of Directors

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO. 1982 50-535A (pn)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

(9)

Olympia J. Snowe
(Full Name)

2268 Rayburn House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202/225-6306

Filer Status	[X] Member of the U.S. House of Representatives — State: Maine District: 2nd	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment [ ] Termination — Termination Date:

HAND DELIVERED
MC
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). This Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Olympia J. Snowe	May 13, 1993

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Reporting Individual's Name

Olympia J. Snowe

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	STATE OF MAINE	SPOUSE INCOME	

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3866

Reporting Individual's Name

Olympia J. Snowe

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i e , speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium
A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash , D C.	Speech	Feb 2, 1992	$2,000
	XYZ Magazine	Article	Aug 13, 1992	$500
	NONE			

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Reporting Individual's Name
Olympia J. Snowe

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock			X								X									X								X
			George Wash. Credit Union Accounts				X									X									X						
			182 Main Street, Dover, Delaware					X							X								X								
	Key Bank Accounts							X								X							X								
	Congressional Credit Union Accts.						X									X						X									X
	Interstate General				X									X								X									
	Fenway Residential Properties						X													p'ship income			X								
	Tucker Anthony				X											X				IRA	N/A										
	Hallwood Realty			X										X							X										

For additional assets and unearned income, use next page

Schedule III

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Olympia J. Snowe

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Hancock Pt., ME Rental Property					X							X									X						
Municipal Investment Trust Fund				X									X								X						X
Aetna Life Insurance Annuity			X										X				Retirement			N/A							X
Janus			X								X						IRA		N/A								X
Janus Twenty			X								X						IRA		N/A								X
Janus Twenty			X								X								X								X
Prudential Bache Securities (Equitec)			X														Ltd. P'ship Settlement					X					X
Tucker Anthony/Freedom Govt. Sec.					X								X								X						
Tucker Anthony/John Hancock Money Market			X										X						X								
Vanguard Index 500			X								X						IRA		N/A								X
Twentieth Century Growth			X								X																X
Twentieth Century Ultra			X								X								X								X

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Reporting Individual's Name: Olympia J. Snowe

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Janus Fund	X			2-18-92	X						
	Janus Twenty	X			2-18-92	X						
	Janus Twenty	X			3-9-92	X						
	Twentieth Century Ultra	X			2-27-92	X						
	Twentieth Century Growth	X			3-2-92	X						
	Prudential Bache Securities (Equitec Ltd. Partnership)			X	2-25-92	X						
	Vanguard Index 500	X			2-18-92	X						
	Municipal Investment Trust Fund		X		6-15-92	X						
	Aetna Life Insurance and Annuity	X			12-16-92	X						

Reporting Individual's Name: Olympia J. Snowe

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Key Bank of Augusta, Maine	Mortgage, 216 B Justice Court		X					
		Washington, D.C.							
	Bangor Savings Bank, Bangor, Maine	Mortgage, Hancock Point, ME				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Reporting Individual's Name
Olympia J. Snowe

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Greek Orthodox Conference	Jan.10-11	Portland, Me. - Tampa - Portland	Y	Y	Spouse	N
	Working Mother Magazine	Feb. 13	Portland, Me. - N.Y. - Portland	N	N	None	N

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Reporting Individual's Name
Olympia J. Snowe

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Kents Hill School, Kents Hill, ME
Corporator	Mechanics Savings Bank, Auburn, ME

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
None		

GPO 1992 50-638A (m)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY -6 AM 10: 02
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(8)

HAND DELIVERED
(Office Use Only)

MC

Gerald B. Solomon
(Full Name)

2265 Rayburn House Office Building
(Mailing Address)

202-225-5614
Daytime Telephone

Washington DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date: ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from the report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Gerald B. Solomon

DATE (Month, Day, Year) 5/5/93

3874

Reporting Individual's Name
Gerald Solomon

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	New York State Government	Retirement Income	$3,451.56

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Gerald Solomon

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
		Wright Patman Credit Union - Washington, DC			X										X							X								
		Glens Falls National Bank - Glens Falls, NY		X											X							X								
		North East Savings Bank - Glens Falls, NY				X									X								X							
		Albany Savings Bank - Glens Falls, NY													X						X									
		Albany Savings Bank Stock - Glens Falls, NY				X							X							X										
		First National Bank - Glens Falls, NY				X									X								X							

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Gerald Solomon

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Trustco Bank - Glens Falls, NY				X									X								X						
	Nuveen Money Market Tax Exempt Stock			X								X									X							
	Smarson-Lehman Money Market Stock		X									X								X								
	Second Home - Lake George, NY					X							X										X					
	Boston Five Bank - Boston, MA		X											X						X								

Schedule III – Continuation

3877

Reporting Individual's Name: Gerald Solomon

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Purchased 2,000 shares of Albany Savings Bank stock	X			3-2-92		X					

Schedule IV

3878

Reporting Individual's Name
Gerald Solomon

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Boston Five Bank	Mortgage on 2nd home - Lake George, NY			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Comminse on Standards)	$270
NONE		

Use additional sheets if more space is required.

3879

Reporting Individual's Name
Gerald Solomon

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American Maritime Officers Association to speak and participate in panel discussion	Jan 9-11	Wash, D.C.-Dania, FL-Wash, DC	Y	Y	spouse	N

This page may be copied if more space is required.

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Reporting Individual's Name
Gerald Solomon

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
NONE	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1982 50-535A (m)

3881

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

Floyd Davidson Spence
(Full Name)

2405 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone: (202) 225-2452

Filer Status	[X] Member of the U.S. House of Representatives	State: S.C. District 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

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3882

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Floyd Davidson Spence	5/13/93

Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of South Carolina	Pension	$6,747.00

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3883

Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X									X
			George Wash. Credit Union Accounts				X								X									X							
			182 Main Street, Dover, Delaware					X						X									X								
S			Southern Farm Bureau Life Insurance Company (Annuity)			X									X				Tax Deferred				N/A								
			Wright Patman Federal Congressional Credit Union			X									X						X										
			The South Carolina National Bank	X											X						X										
			The Lexington State Bank					X							X							X									
S			The Lexington State Bank			X									X						X										
			Southern Farm Bureau Life Insurance Company (IRA)				X								X				Tax Deferred				N/A								

For additional assets and unearned income, use next page

Schedule III

3884

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Floyd Davidson Spence

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction * (X)
	100 Shares of Spence Plantation, Inc. (S. Corp)									x					x			Land Sales										x	
	100+/-acres real estate-Lexington SC (Based on updated survey)									x					x				x										
	.9+/-acres real estate-Lexington SC	x													x													x	x
	.8+/-acres real estate-Lexington SC	x													x										x				x
	(All property is located on Lake Murray)																												

Schedule III—Continuation

3885

Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	.9 +/- acres real estate - Lexington, SC		x		2/3/92				x			
	.8 +/- acres real estate - Lexington, SC		x		1/23/92				x			
	(All property is located on Lake Murray)											

Schedule IV

3886

Reporting Individual's Name

Floyd Davidson Spence

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	NationsBank of South Carolina Columbia, SC	Mortgage on Number One Homeport					X		
	The Lexington State Bank Lexington, SC	Personal-Secured by real eatate						X	
	The First Savings Bank Columbia, SC	Personal-Secured by real estate			X				
S	The Lexington State Bank Lexington, SC	Personal-Secured by real estate			X				

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Commitee on Standards)	$270

Use additional sheets if more space is required.

3887

Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 26.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Spence Plantation, Inc. (uncompensated)

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
1970	State of South Carolina Retirement System	Pension

GPO: 1982 50-535A (m)

3888

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 JUN 10 PM 5:48
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

MC HAND DELIVERED (7)

(Office Use Only)

Floyd Davidson Spence
(Full Name)

2405 Rayburn House Office Building
(Mailing Address)

Washington, DC 20515

Daytime Telephone (202) 225-2452

Filer Status	[X] Member of the U S House of Representatives	State S.C. District 2nd	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[X] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app 6, § 104 and 18 U S C § 1001).

SIGNATURE OF REPORTING INDIVIDUAL		DATE (Month, Day, Year)
Floyd Davidson Spence	6/10/93	~~5/13/93~~

3889

Reporting Individual's Name

Floyd Davidson Spence

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of South Carolina	Pension	$6,747.00

For payments to charity in lieu of honoraria, use Schedule II

3890

Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are not self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X								X								X
			George Wash. Credit Union Accounts				X								X								X						
			182 Main Street, Dover, Deleware					X						X									X						
S	Southern Farm Bureau Life Insurance Company (Annuity)					X									X				Tax Deferred				N/A						
	Wright Patman Federal Congressional Credit Union					X									X						X								
	The South Carolina National Bank			X											X						X								
	The Lexington State Bank						X								X							X							
S	The Lexington State Bank					X									X						X								
	Southern Farm Bureau Life Insurance Company (IRA)						X								X				Tax Deferred				N/A						

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Floyd Davidson Spence

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	100 Shares of Spence Plantation, Inc. (S. Corp)									X					X			Land Sales								X		
	100+/-acres real estate-Lexington SC (Based on updated survey)									X					X				X									
	.9+/-acres real estate-Lexington SC	X													X											X		X
	.8+/-acres real estate-Lexington SC	X													X								X					X
	(All property is located on Lake Murray)																											

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Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	.9 +/- acres real estate - Lexington, SC		x		2/3/92				x			
	.8 +/- acres real estate - Lexington, SC		x		1/23/92				x			
	(All property is located on Lake Murray)											

Schedule IV

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Reporting Individual's Name

Floyd Davidson Spence

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delawere	Mortgage on 182 Main St. Dover, Del				X			
	NationsBank of South Carolina Columbia, SC	Mortgage on Number One Homeport					X		
	The Lexington State Bank Lexington, SC	Personal-Secured by real estate						X	
	The First Savings Bank Columbia, SC	Personal-Secured by real estate			X				
S	The Lexington State Bank Lexington, SC	Personal-Secured by real estate			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

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Reporting Individual's Name
Floyd Davidson Spence

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States Exclude positions listed on Schedule I For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
President	Spence Plantation, Inc. (uncompensated)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U S Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement
1970	State of South Carolina Retirement System	Pension

GPO: 1992 59-838A (m)

3896

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

'93 JUN 17 AM 7:43
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(14)

JUN 16 1993

NC

(Office Use Only)

John M. Spratt, Jr.
(Full Name)

1536 Longworth Building, U. S. House of Representatives
(Mailing Address)

Washington, D. C. 20515

Daytime Telephone: 202/225-5501

Filer Status	[X] Member of the U.S. House of Representatives	State: S. Carolina District: 5th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
John M Spratt Jr.	June 16, 1993

Reporting Individual's Name
John M. Spratt, Jr.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Chevy Chase Presbyterian Church	Spouse's Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name

John M. Spratt, Jr.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
None				

This page may be copied if more space is required.

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Reporting Individual's Name

John M. Spratt, Jr.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																	Block D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC JT	Examples: S ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
	York Bancshares, Inc.								X			X												X					
	Sonoco Products, Inc.						X					X											X						
	NationsBank, NA						X					X											X						
	Spratt Insurance Agency, Inc.				X														X										
	Springs Industries, Inc.			X								X									X								
	Exxon Corporation			X								X									X								

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Citicorp			X								X								X								
Delta Woodside, Inc.			X								X								X								
RSI Holdings, Inc.	X																	X									
Waterman Marine Corp.	X																	X									
800-acre farm, Fort Mill, SC *								X				X															
--FAA Lease, 80 acres												X												X			
--House rental, J. Reid, Tenant												X										X					
--Tree nursery, W. Howle, Tenant												X						X									
--Plant nursery, Burris Bros.												X						X									
Office Bldg., Main Street,																											
Fort Mill, SC, leased to																											
Abby, Inc.			X									X										X					
Lot 87, River Pointe, Mecklen-																											
burg County, NC					X													X									

*Four items indented (--) under farm are leases of farm

3900

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Cash value of whole life																											
insurance policies:																											
--New York Life Ins. Co.				X																							
--Home Life Ins. Co., New York				X																							
--Life Of Virginia			X																								
--Equitable Life Assurance		X																									
Note from Spratt for Congress					X												X										
T.B. & Alexa H. Spratt Note																	X										
J. H. Rainey Note			X														X										
J. David Weeks Note			X														X										
Law Library				X													X										
Lake Wylie Plaza Associates,																											
Class "B" Limited Partnership																											
Interest (5%)				X																X							

Schedule III – Continuation

3901

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Bank of York, IMA Account		X											X					X									
	Bank of York, NOW Account			X										X					X									
	Crestar Bank, Checking Account		X															X										
	Congressional Federal Credit		X																X									
	Union													X														

Schedule III—Continuation

3902

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
DC	Gerber Products Co.				X						X									X								X
DC	Tenneco Inc.				X						X									X								X
DC	James River Corp. of Virginia			X							X									X								X
DC	Strategic Fixed Income Fund					X							X										X					X
DC	Caremark International, Inc.			X							X							X										X
DC	Ethyl Corporation			X							X								X									X
DC	Nations Prime Portfolio					X					X									X								X
DC	Dillard Dept. Stores, Inc.			X							X								X									
DC	British Tele. PLC, ADR			X							X									X								X
DC	Southwest Airlines Co.		X								X								X									
* DC	Thermo Fiberteck, Inc.		X																									X
DC	Nations Managed Bond Fund					X							X							X								X
DC	Nations Value Fund						X						X								X							X
DC	Baxter International, Inc.				X						X									X								X
DC	Pepsico, Inc.				X						X									X								

*Warrants to purchase stock, spin-off from Thermo Electron, Corp.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: John M. Spratt, Jr.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
DC	NationsBank Daily Income Fund					X								X									X					
DC	US Treasury Notes					X						X											X					X
DC	Paine Webber Group, Inc.			X								X								X								X
DC	CPC International Inc.				X							X										X						X
DC	American Telephone & Teleg. Co					X						X										X						
DC	Bristol Myers Squibb Co.			X								X										X						X
DC	Colgate-Palmolive, Inc.					X						X										X						
DC	Procter & Gamble, Inc.					X						X										X						
DC	Alcoa				X							X								X								X
DC	Federal Nat'l Mtge. Assn.			X								X										X						
DC	Archer Daniels Midland Co.			X								X									X							X
DC	Dayton Hudson Corp.				X							X									X							X
DC	Emerson Electric Co.				X							X								X								
DC	Nations Capital Growth Fund						X					X										X						X
DC	Thermo Electron Corp.			X								X								X								

Reporting Individual's Name
John M. Spratt, Jr.

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: S $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
DC	Nations Prime Portfolio	X			01-31-92		X					
DC	ALCOA		X		02-27-92	X						
DC	Nations Prime Portfolio	X			02-29-92	X						
DC	Nations Prime Portfolio	X			03-30-92	X						
DC	Nations Prime Portfolio	X			04-30-92	X						
DC	Nations Prime Portfolio	X			05-31-92	X						
DC	Nations Prime Portfolio	X			06-30-92	X						
DC	Nations Prime Portfolio	X			07-31-92	X						
DC	Nations Prime Portfolio	X			08-31-92	X						
DC	U.S. Treasury Note (maturity)		X		09-30-92			X				
DC	Nations Prime Portfolio	X			09-30-92		X					
DC	Thermo Fibertek, Inc. (stock spin-off)				10-15-92	X						
DC	Nations Capital Growth Fund	X			10-20-92		X					
DC	Briston Myers Squibb		X		10-23-92	X						
DC	British Tele. PLC ADR		X		10-23-92	X						
DC	Ethyl Corp.		X		10-23-92	X						
dc	James River Corp. of Virginia		X		10-23-92	X						

Reporting Individual's Name
John M. Spratt, Jr.

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
Example:	ABC Corporation Common Stock	X			10-12-92			X				
DC	Thermo Fibertek, Inc.		X		10-23-92	X						
DC	Nations Managed Bond Fund	X			10-26-92			X				
DC	Nations Value Fund	X			10-26-92		X					
DC	Nations Prime Portfolio		X		10-31-92			X				
DC	Archer Daniels Midland Co.		X		03-12-92	X						
DC	CPC International, Inc.		X		07-17-92	X						
DC	ALCOA		X		10-05-92		X					
DC	Bristol Myers Squibb		X		10-05-92	X						
DC	Dayton Hudson Corp.		X		10-05-92		X					
DC	Gerber Products Co.		X		10-05-92		X					
DC	James River Corp. of Virginia		X		10-05-92	X						
DC	Tenneco, Inc.		X		10-05-92	X						
DC	Nations Value Fund	X			10-09-92			X				
DC	Strategic Fixed Income Fund	X			10-09-92		X					
DC	Nations Capital Growth Fund	X			10-09-92			X				
DC	Strategic Fixed Income Fund	X			11-09-92		X					
DC	Caremark Int'l Inc. (stock spin-off)				12-04-92	X						

Reporting Individual's Name
John M. Spratt, Jr.

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
DC	Nations Prime Portfolio	X			12-30-92	X						
DC	Paine Webber Group		X		10-05-92	X						
DC	Strategic Fixed Income Fund		X		11-09-92			X				

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Reporting Individual's Name: John M. Spratt, Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Bank of York	Notes secured by pledge of stocks and securities.				X			
	New York Life Insurance Company	Loan against cash value of policies for payment of premiums.				X			
	Home Life Insurance Co., New York	Loan against cash value		X					
	NationsBank VISA	Credit card balances	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

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Reporting Individual's Name

John M. Spratt, Jr.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
1.	Democratic Issues Conference, Piney Point, MY Nat'l Legislative Education Foundation	1/30/31-92	Washington, DC to Piney Point, MY, in personal automobile at own expense.	Y	Y	None	No
2.	S.C. Bankers Convention, Kiawah Island, SC	5/15-16/92	Washington to Charleston to Charlotte; van to Kiawah	Y	Y	None	No
3.	Congressional German Study Group; Conference with Bundestag at Charlottesville, Virginia, sponsored by German Marshall Fund.	4/22-24/92	Washington to Charlottesville to Washington in personal auto at own expense.	Y	Y	Spouse (1 day)	No
4.	Sumter Chamber of Commerce, Annual Conference		Washington to Savannah to Charlotte at own expense (freq. flyer)	Y	Y	None	No

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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

Honorable Fortney Pete Stark (Full Name)

239 Cannon House Office Building (Mailing Address) — (202) 225-5065 (Daytime Telephone)

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: California District: 13th	[ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment — [ ] Termination — Termination Date

MAY 17

HAND DELIVERED

rwc (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No		Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**		X	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**		X
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	X		Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	X	
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	X		Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	X	
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	X		Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**		X
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	X		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)		X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 17, 1993

3910

Reporting Individual's Name

Fortney Pete Stark

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	National Association of Manufacturers, Wash. D.C.	Speech	10/1/91	$ 300.00
	American Physical Therapy Assn., San Francisco, CA	Speech	2/9/92	2,000.00
	Bristol-Myers Squibb Co., Wash., D.C.	Speech	2/7/92	2,000.00
	American Society of Consultant Pharmacists,Wash.D.C.	Speech	3/10/92	2,000.00
	American Society of Plastic & Recon.Surgeons/Wash.D.C.	Speech	3/12/92	2,000.00
	College of American Pathologists	Speech	3/18/92	2,000.00
	The American College of Ob/Gyns/Wash., D.C.	Speech	3/31/92	1,500.00
	American Group Practice Assn./Wash.,D.C.	Speech	4/2/92	2,000.00
	Assoc. of Freestanding Radiation Oncology Centers/D.C.	Speech	6/18/92	2,000.00
	Atlantic Information Services, Inc./Wash., D.C.	Speech	9/24/92	2,000.00
	National Association of Boards of Pharmacy/Wash., D.C.	Speech	11/9/92	2,000.00

This page may be copied if more space is required.

Reporting Individual's Name
Fortney Pete Stark

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	Rental House 316 2nd St. S.E. Washington, D.C. 20001								X					X												X				
	Aardolfe Oil Company/Prod. Int.						X												royalty					X						
	Note from Stark Investment Co.										X				X												X			
	Charles Schwab & Co. CMA								X						X										X					
	Federal Realty Inv. Trust								X				X													X				

For additional assets and unearned income, use next page

Schedule III

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Fortney Pete Stark

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependant child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	Detail of Assets & Income of Stark Investment Company, a Calif. partnership, Hayward, Calif.	None	Less than $1,001	$1,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $250,000	$250,001 - $500,000	$500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	Less than $201	$201 - $1,000	$1,001 - $2,500	$2,501 - $5,000	$5,001 - $15,000	$15,001 - $50,000	$50,001 - $100,000	$100,001 - $1,000,000	over $1,000,000	
SIC	Charles Schwab & Co., CMA				x									x									x						
SIC	Warehouse: Littlefield Drive So. San Francisco, CA									x			X														x		
SIC	Eldorado Industrial Park-Land						x												x										
SIC	Whitney Develop. Co. Sacramento, CA Various							x							X											x			
SIC	Damson Oil Co., Texas					x												royalties				x							
SIC	Aardolie Oil Co., Texas			x														royalties		x									
SIC	R. Richey Oil Co., Texas				x													royalties					x						
SIC	Notes Receivable, Howard Dick					x								x	x									x					
SIC	Bank of America			x										x							x								
SIC	Note Receivable, Jeffrey Stark			x															x										
	Note Receivable, Keith Donahue					x								x										x					x

Schedule III—Continuation

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Fortney Pete Stark

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
American Health Properties REIT						x					x											x						x
IRT Properties REIT				x							x											x						x
Dial REIT				x							x											x						x
Grubb & Ellis REIT							x				x												x					x
VanguardGNMA Fund							x				x												x					x
Fair Market Value of Equity (25%) Shopping Center, Columbus, Ohio	x											x						x										x

Page 5 of 9

Schedule III – Continuation

Reporting Individual's Name

Fortney Pete Stark

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	American Health Properties REIT		x		4/21/92				x			
	IRT Properties REIT		x		4/21/92		X					
	Dial REIT		x		4/21/92		x					
	Grubb & Ellis REIT		x		4/21/92				x			
	Vanguard GNMA Fund		x		4/21/92				x			
	Shopping Center, Columbus, Ohio - Terminated Partnership 1/5/92			x	1/5/92				x			
	Grubb & Ellis REIT		x		2/18/92		x					
	Keith Donahue Note - received from sale of personal residence	-	-	-	3/2/92			x				

Reporting Individual's Name
Fortney Pete Stark

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Citicorp S&L	Mortgage on 316 2nd St, S.E,/D,C.			x				
	NationsBank of Maryland	Mortgage on 316 2nd St. S.E./D.C.		x					
SIC	Fortney Stark (Self Interest)	Note Payable by Stark Investment Co.						x	
SIC	Confederation Life Ins. Co.	Mortgage on Warehouse, So.S.F.,CA							x
SIC	Bernard Litchfield	Assumed Liability			x				
SIC	John Reegor Estate	General Liability	x						
	Boston Co., Boston, Mass.	Assumed Liability /Columbus, Ohio Shopping Center				x			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
	None	

Use additional sheets if more space is required.

Reporting Individual's Name
Fortney Pete Stark

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
American Physicial Therapy Assn.		Feb.6-10	Wash,D.C.-San Fran-Wash.DC	N	Y	none	3 Days
American Medical Association		June 22	Wash.,D.C.-Chicago-Wash.D.C.	N	N	none	N

This page may be copied if more space is required.

Reporting Individual's Name

Fortney Pete Stark

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner in:	(1) Stark Inveatment Co., Hayward, CA (2) Whitney Development Co., Orinda, CA
President & Director	Pete Stark Foundation, Hayward, CA

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1983 50-535A (pa)

3918

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

10

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(Office Use Only)

Clifford B. Stearns
(Full Name)

332 Cannon House Office Building
(Mailing Address)

(202) 225-5744
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Florida District: 6	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? If yes, Complete and Attach Schedule I.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, Complete and Attach Schedule VI.	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach Schedule II.	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, Complete and Attach Schedule VII.	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, Complete and Attach Schedule III.	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach Schedule VIII.	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, Complete and Attach Schedule IV.	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach Schedule IX.	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, Complete and Attach Schedule V.	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Clifford B. Stearns

DATE (Month, Day, Year): May 13, 1993

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Reporting Individual's Name

Clifford B. Stearns

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	First Silver Springs, Inc.	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name
Clifford B. Stearns

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are not self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash Credit Union Accounts				X									X									X							
	162 Main Street, Dover, Delaware					X							X									X								
	Barnett Bank, Ocala, FL					X								X										X						
	Dean Witter/Liquid Asset Fund					X						X										X								
	Sun Bank, Ocala, FL			X										X						X										
	Congressional Fed. Credit Union			X										X						X										
	Note receivable: Friends																													
	of Cliff Stearns				X														X											

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clifford B. Stearns

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (OC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	O $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	
71.70% interest, Silver Springs Inn, Ltd., a Partnership, Silver Springs, FL; (motel:cash, land, building, furniture, equipment, debt) (see transaction schedule)					x								x									x	x	x (gross) x (net)			x
Silver Springs Inn, Ltd., (above)																	partnership income						x				
46.58% interest, Rock Creek Park, Ltd., a Partnership, Silver Springs, FL; (cash, mortgage receivable, and debt)			x									x		x						x		x					
Rock Creek Park, Ltd., (above)																	partnership income	x									
53.00 interest, First Davenport, Inc., an S Corp, Ocala, FL, cash and note receivable					x							x										x					
First Davenport, Inc., (above)																	S Corp income	x									

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clifford B. Stearns

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	33.93% interest, Potomac Park, Inc., an S Corp, Gainesville, FL; (motel:cash, land, furniture, building, equipment, debt)	x												x	x									x	x			x (net) x (gross)	x
	(see transaction schedule) Potomac Park, Inc., (above)																	S Corp income	x										
	100% interest First Silver Springs, Inc., a Corporation, Silver Springs, FL; (motel:cash, land, building, furniture, equipment, debt) (see transaction schedule)								x										x										x
	100% interest, Stearns House, Inc., Management, an S Corp (management company:cash and furniture)				x							x								x									
	Stearns House, Inc., Management (above)																	S Corp income				x							
	Internal Revenue Service													x							x								

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clifford B. Stearns

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Rental Building (Restaurant)																													
Silver Springs, FL								x					x										x	x(gross) x(net)					
Rental Building (Office)																													
Silver Springs, FL						x							x									x(net)	x(gross)						
Rental Triplex (Residential)																													
Silver Springs, FL (see transaction schedule)		x												x	x			(net)	x				x(gross)			x			x
37.5% interest, Condominium,																													
St. Augustine, FL					x								x						x(net)			x(gross)							
Mortgage Receivable, Colony Reef/																													
Ocala Investment, Inc., (sale																													
of interest in condominium)					x									x								x							
Mortgage Receivable, Shri Natjhi,																													
Inc, Silver Springs, FL; (sale																													
of triplex)						x								x									x						
Note Receivable, Grace																													

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Clifford B. Stearns

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
	Presbyterian Church (satisfied)	x																	x										
	Loan Receivable, Silver Springs Inn, Ltd.				x									x							x								
	Loan Receivable, Potomac Park, Inc.				x									x									x						
	Sun Bank, Ocala, FL (IRA)				x									x								x							
S	Sun Bank, Ocala, FL (IRA)				x									x							x								

Schedule III—Continuation

Reporting Individual's Name: Clifford B. Stearns

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependant child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ASC Corporation Common Stock	X			10-12-92			X				
	Silver Springs Inn, Ltd., Silver Springs, FL; (assets sold for cash and mortgage receivable)		x		6/3/92						x	
	Potomac Park, Inc., Gainesville, FL; (assets sold for cash and mortgage receivable)		x		6/26/92					x		
	First Silver Springs, Inc., Silver Springs, FL; (assets sold for cash and mortgage receivable)		x		3/26/92						x	
	Rental triplex, Silver Springs, FL; (sold for cash and mortgage receivable)		x		3/26/92				x			

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Reporting Individual's Name
Clifford B. Stearns

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Alliance/First Union, Ocala, FL	mortgage on rental offices, Silver Springs, FL	X						
	Sun Bank, Ocala, FL	mortgage on rental triplex & restaurant, Silver Springs, FL			X				
	Great Western Bank	mortgage on condominium, St. Augustine, FL		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Clifford B. Stearns

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
General & limited partner	Silver Springs Inn, Ltd., and Rock Creek Park, Ltd.
President	First Davenport, Inc., and Potomac Park, Inc.
President	First Silver Springs, Inc., and Stearns House, Inc., Management

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1982 80-535A (m)

3928

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(12)

RECEIVED
1993 MAY 17 AM 11: 21
OFFICE OF PUBLIC RECORDS
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

mc
(Office Use Only)

Charles W. Stenholm
(Full Name)

1211 Longworth Building, House of Representatives
(Mailing Address)

Washington, D. C. 20515

Daytime Telephone: 202-225-6605

Filer Status	[X] Member of the U.S. House of Representatives	State: Texas District: 17th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [X]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Charles W. Stenholm

DATE (Month, Day, Year): 5-17-93

3929

Reporting Individual's Name

Charles W. Stenholm

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	none to report		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3930

Reporting Individual's Name
Charles W. Stenholm

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Texas Rice Producers, Beaumont, Texas	Speech	12/12/91	$2000.00
	Jack Africk Charity Pro-Am Tennis Tournament / Boca Rotan, Fla.	Charity event	1/2-4/92	1000.00
	National Grain Trade Council, Naples, Fla.	Speech	2/7	1000.00
	Smokelesa Tobacco Council, Washington, D. C.	Speech	3/11	1000.00
	Chicago Board of Trade, Boca Rotan, Fla	Speech	3/20-22	1000.00
	Farm Credit Bank of Texas, Austin, Texas	Speech	4/22-23	200.00
	American Hospital Assoc., Washington, D. C.	Speech	5/8	1000.00
	Coalition against Regressive Taxation(CART)/ Wash., D. C.	Speech	5/20	2000.00
	Smokeless Tobacco Council, Haymarket, Va.	Charity golf event	5/26	1000.00
	National Agri/Chemical Retailers Assoc., Wash. D. C.	Speech	9/15	1000.00
	Nat. Council of Community Hospitals, Tucson, Ariz.	Speech	11/13-16	1000.00
	Professional Lawn Care Assoc., Indianapolis, Ind.	Speech	11/16-17	1000.00
	American Cyanamid, Las Vegas, Nev.	Speech	12/15-17	1000.00

This page may be copied if more space is required.

Reporting Individual's Name

Charles W. Stenholm

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)									Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	ORDINARY INCOME/LOSS	OIL & GAS ROYALTIES	Other Income (Specify Type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X											X								X
	George Wash. Credit Union Accounts				X									X											X						
	182 Main Street, Dover, Delaware					X							X											X						
JT	Independent Bank Shares(360shares)			X																	X										
JT	Co-Op Stocks				X							X											X								
JT	Ericksdahl Coop Gin			X																	X										
JT	Jones-Haskell Grain Coop			X																	X										
JT	Stamford Electric Coop			X																	X										
JT	Plains Cotton Coop			X								X											X								
JT	Rolling Plains Coop Compress			X								X											X								

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles W. Stenholm

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)									Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	ORDINARY INCOME/LOSS	OIL & GAS ROYALTIES	AG PROGRAM PAYMENTS	OTHER	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	S&S Feeders 50% partnership	X																X					X									
JT	Okla. Oil&Gas Lmt. partnrshp(spouse)			X																X					X							
JT	Okla. Oil&Gas Lmt. partnership			X																X					X							
S	Cynthia Ann Stenholm(see Page 12) Dessa Carmen Watson estate					X												X		X							X					
DC	(see Page 12) Courtney Ann Stenholm trust/				X													X								X						
JT	First National Bank, Stamford			X										X									X									
JT	First Virginia Bank			X										X									X									
JT	Cong. Fed. Credit Union			X										X									X									
JT	4760 John Deere tractor					X												X									X					X
JT	1990 Buick Sabre			X														X									X					
JT	IRA(Investors Diversified Serv.)				X									X												X						
JT	Farmland-buildings & equipment 840 acres-Jones Cty., Texas							X					X					X		X	X						X					
	Rent																	X									X					
	USDA																			X							X					
	Crop Insurance																				X						X					

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Charles W. Stenholm

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)										Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	ORDINARY INCOME/LOSS	OIL & GAS ROYALTIES	AG PROGRAM PAYMENTS	OTHER	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Halliburton Co.																	X								X						
JT	Double S. Farms, Inc. (50% stock)					X																X										
S	Farmland-oil & gas interests 37.6 acres-Wheeler Co.				X													X	X								X					
	(Chevron, Texaco, B&B Farm Industries, Wolf Creek Energy,																															
	DKM Resources, Inc., Bison Petroleum Corp., Akis Energy																															
	Corp., Ruwco Oil & Gas, Ebron Oil, TGX)																															
JT	S&S Enterprises 40.5 acres				X												X							X								
JT	Home - Arlington, Va.							X														X										

Schedule III—Continuation

Reporting Individual's Name: Charles W. Stenholm

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	John Deere 4755/tractor was traded in for a 4760 John Deere tractor	X			8/3/92			X				

Reporting Individual's Name
Charles W. Stenholm

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any *time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First National Bank, Stamford, Texas	Farm Home improvements	X						
JT	First National Bank,Sweetwater, Texas	Personal		X					
JT	Federal Land Bank, Haskell, Texas	Business - Farmland		X					
JT	Equitable Life Assurance	Business - Farm				X			
JT	Rolling Plains Production Credit Assoc.	Business - Farm		X					
JT	Deere Credit Services	Business - Tractor			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
6/1/92 - Appreciation luncheon honoring Cong. & Mrs. Stenholm in Abilene, Texas. (approx. 1000 attendees)	Framed photograph of Texas scenery presented as a memento of the occasion.	$325.00

Use additional sheets if more space is required.

SCHEDULE VII: FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

Reporting Individual's Name
Charles W. Stenholm

Source	Date(s)	Point of Departure-Destination(s)-Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included	Time not at sponsor's expense
Jack Africk Charity Pro Am	1/2-4/92	DC - Boca Raton, FL - DC	Y	Y	Spouse	
U.S. Dairy Forum	1/17-18	DC - Orlando, FL - DC	Y	Y		
Ntl. Potato Council	1/24	DC - San Antonio, TX	N	Y		
Ntl. Cattlemen's Assoc.	1/24-25	San Antonio, TX - San Diego, CA - DC	Y	Y		
Ntl. Grain Trade Council	2/7	DC - Naples, FL - DC	N	Y		
Congressional Charity Tennis Tournament	3/6-8	DC - Greenbriar, WV - DC	Y	Y	Spouse	
Chicago Board of Trade Future's Industry Association	3/20-22	DC - Boca Raton, FL - DC	Y	Y	Spouse	
Farm Credit Banks of Texas	4/22 - 23	Brownwood, TX Austin, TX - Abilene	Y	Y	Spouse	
SW Bell Charity Colonial Golf Tournament	5/17-18	Fort Worth, TX - DC	N	Y		
Ntl. Agricultural Biotechnology Council Texas A&M	5/29	DC - College Station, TX - Abilene, TX	N	Y		
Texas Hospital Assoc.	6/1-2	Abilene, TX - Dallas, TX - DC	Y	Y	Spouse	
American Petroleum Institute	6/6-7	DC - Wintergreen, WV - DC	Y	Y	Spouse	
Texas School Food Service Assoc.	6/14-15	Abilene - Fort Worth, TX - DC	Y	Y		
Cotton Warehouse Assoc of America	6/19 21	DC - Naples, FL - DC	Y	Y	Spouse	
American Society of Agriculture Engineers	6/22	DC Charlotte, NC DC	N	Y		
American Meat Institute	7/17 19	DC Salt Lake City UT DC	Y	Y	Spouse	
American Society of Animal Science	8/8	DC Pittsburg, PA DC	N	Y		
Ben Hogan Charity Texarkana Open	8/12 14	DC - Texarkana TX	Y	Y	Spouse	
Texas Medical Association	8/15 16	Fort Worth, TX Austin, TX Fort Worth	Y	Y		

SCHEDULE VII: FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

Reporting Individual's Name
Charles W. Stenholm

Source	Date(s)	Point of Departure-Destination(s)-Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included	Time not at sponsor's expense
Danny Thompson Mem. Charity Golf Tournament	8/17-23	Dallas - Sun Valley, ID - Salt Lake City, UT	Y	Y	Spouse	2 Days
Delta Charity Golf Tournament	8/23-25	Salt Lake City, UT - Park City, UT - Lubbock, TX	Y	Y	Spouse	
Ntl. Poultry Waste Symposium	10/7	DC - Birmingham, AL	N	Y		
American Meat Institute	10/7-8	Birmingham , AL - Orlando, FL - College Station, TX	Y	Y		
American Petroleum Institute	11/8-9	Abilene, TX - New York, NY - San Angelo, TX	Y	Y		
Ntl. Council of Community Hospitals	11/13-16	DC - Tucson, AZ - Indianapolis, IN	Y	Y	Spouse	
Professional Lawn Care Assoc.	11/16-17	Indianapolis, IN - DC	Y	Y	Spouse	
Ntl. Milk Producers	12/1-3	DC - Las Vegas, NV - Kansas City, KS	Y	Y	Spouse	
Farmland Industries	12/3-4	Kansas City, KS - DC	Y	Y	Spouse	
American Farm Bureau	12/14-15	DC - Chicago, IL	Y	Y	Spouse	
American Cyanamid	12/15-17	Chicago, IL - Las Vegas, NV - Denver, CO	Y	Y	Spouse	
Public Lands Council	12/17-18	Denver, CO - DC	Y	Y		

Reporting Individual's Name

Charles W. Stenholm

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Double S. Farms
Partner	S & S Feeders
Partner	S & S Enterprises

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 25.

Date	Parties To	Terms of Agreement
	none	

GPO: 1983 50-638A (#1)

Charles W. Stenholm

SCHEDULE III - ASSETS AND "UNEARNED" INCOME (Continued from page

Additional information on Cynthia Ann Stenholm (spouse) - Dessa Carmen Watson estate:

Fixed common trust funds, NCNB, Abilene	Category D
Equity common trust funds, NCNB, Abilene	B
Money market funds, NCNB, Abilene	A
1/2 interest rent house-Dumas, Texas	B
1/4 interest Lot 27, Block 1, Stamford, Texas	A
1/6 interest Vaugnn & Jett Survey,Taylor Cty, Texas	E
Mineral assets, Wheeler Cty, Texas	E

Courtney Ann Stenholm Trust (daughter)

Fixed common trust funds, NCNB, Abilene	B
Income stock fund, NCNB, Abilene	B
Money market funds, NCNB, Abilene	A
Mineral assets, Wheeler County, Tex.	D

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(b)

1993 MAY 17 PM 3:51

LOUIS STOKES
(Full Name)

2365 Rayburn House Office Building — 225-7032
(Mailing Address) — Daytime Telephone

Washington, D. C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Ohio District: 11th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED

mc (Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	[ ]	[X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance or article in the reporting period? **If yes, Complete and Attach Schedule II**	[X]	[ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	[X]	[ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	[ ]	[X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	[ ]	[X]
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	[X]	[ ]
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	[X]	[ ]
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	[ ]	[X]

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	[ ]	[X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	[ ]	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month, Day, Year): 5/17/93

Reporting Individual's Name

LOUIS STOKES

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	National Assn. of Health Services Executives	Speech	May 1, 1992	$1,000
	National Assn. of Medical Minority Educators,Inc.	Speech	Sept. 21, 1992	150

This page may be copied if more space is required.

Reporting Individual's Name

LOUIS STOKES

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: B — ABC Corporation Stock				X								X									X									X
George Wash. Credit Union Accounts					X									X									X							
182 Main Street, Dover, Delaware						X							X									X								
Wright-Patman Congressional Credit Union Accounts			X											X						X										
Citizens Bank of Maryland			X											X						X										
Dominion Bank Shares Mortgage Corp. (Escrow)				X										X						X										
Northwest National Life Ins. Co.			X									X									X									
The Prudential-Keough/Annuity						X																NA								
3611 Chelton Road, Shaker Heights, Ohio						X							X											X						

For additional assets and unearned income, use next page

Reporting Individual's Name
LOUIS STOKES

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21

S. O. L.	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Leader Mortgage Co., Cleveland, Ohio	Mortgage on 3611 Chelton Rd. Shaker Heights, Ohio		x					
	Sears Financial Corp.	Mortgage on 3611 Chelton Rd. Shaker Heights, Ohio		x					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name: LOUIS STOKES

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Urban Institute	Feb. 13-16, 1992	Wash., D. C.-Ft. Lauderdale, Fla.-Wash., DC.	Y	Y	Spouse	N
	Congressional Black Caucus Foundation	Feb. 21 - 24, 1992	Baltimore Washington International - Orlando, Fla.-BWI	Y	Y	Spouse	N
	National Assn. of Health Services Executives	May 1,1992	Wash.,D.C.-Chicago-Cleveland, Ohio	N	Y	None	N
	Shaw University	May 9, 1992	Wash., D.C.-Raleigh, N.C.-Cleveland, Ohio	N	Y	None	N
	Congressional Black Caucus	Nov. 11 - 12, 1992	Cleveland, Ohio - Atlanta, Ga.-Cleveland	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
LOUIS STOKES

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Trustee	The Martin Luther King, Jr. Center for Social Change
Board Member	Congressional Black Caucus Foundation
Chairman of the Board	Black Elected Democrats of Cleveland, Ohio (BEDCO)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement

GPO: 1982 96-336A (pm)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers and employees

1993 MAY 14 AM 8 43

Ted Strickland
(Full Name)

P O Box 580
(Mailing Address)

Lucasville, Ohio 45648

Daytime Telephone: 614-354-3600

MC (4)

HAND DELIVERED
(Office Use Only)

Filer Status	☑ Member of the U S House of Representatives — State: Ohio; District: 6th	☐ Officer or Employee	Employing Office
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes ☑	No ☐	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes ☐ No ☑
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes ☐	No ☑	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes ☐ No ☑
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes ☐	No ☑	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII**	Yes ☑ No ☑
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes ☐	No ☑	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes ☐ No ☑
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes ☐	No ☑	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes ☑	No ☐

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Ted Strickland MC

DATE (Month, Day, Year) 5/13/93

3947

Reporting Individual's Name
Ted Strickland

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$6,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Shawnee State University	Salary/Wages	28,558
	Ohio Dept. of Mental Health	Consultation	27,318

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
H		Brother, Portsmouth, Ohio													X						X									

For additional assets and unearned income, use next page

9949

House of Representatives —
Washington, D.C. 20515

MEMORANDUM

My wife is President of her own business. However, I have no investment in her company and will not inherit the company if she were to die. She has keyman insurance which will buy her shares automatically -- giving her partner full control upon her death.

Frances does not draw a salary or receive any income because she develops products (screening test) and all the income goes for overhead and promotion.

Her indebtedness is to the shareholders — her parents and a non-relative.

I do not serve on the Board of Directors and in no way have a connection to the business.

[redacted]

Let me know if you see any problems —

Ted

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 26 AM 7:57
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
MC
INSIDE MAIL
(Office Use Only)

Ted Strickland
(Full Name)

P.O. Box 580
(Mailing Address)

Lucasville, Ohio 45648

Daytime Telephone: 614-259-3600

Filer Status	☑ Member of the U.S. House of Representatives — State: Ohio, District: 6th	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☒ Amendment	☐ Termination — Termination Date:

PRELIMINARY INFORMATION – ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes ☑	No ☐	Did you, your spouse, or a dependant child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes ☐	No ☑
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes ☐	No ☑	Did you, your spouse, or a dependant child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes ☐	No ☑
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes ☐	No ☑	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes ☐	No ☑
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes ☐	No ☑	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes ☐	No ☑
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes ☐	No ☑	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION – ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes ☐	No ☑
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes ☑	No ☐

CERTIFICATION – THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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SIGNATURE OF REPORTING INDIVIDUAL: Ted Strickland

DATE (Month, Day, Year): 5/25/93

3951

Reporting Individual's Name
Ted Strickland

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Shawnee State University	Wages	21,558
	Ohio Department of Mental Health	Consultation	27,518

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

3952

Reporting Individual's Name
Ted Strickland

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

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			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
JT		Bank Ohio, Portsmouth, Ohio		X											X							X								

For additional assets and unearned income, use next page

Schedule III

3959

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(12)

MAY 17 P 2 50

Gerry Eastman Studds
(Full Name)

237 C.H.O.B. Washington, DC 20515 — 202-225-3111
(Mailing Address) — Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State MA District 10	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

HAND DELIVERED

Mc (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — DATE (Month, Day, Year) 5/17/93

3954

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000		
S, DC, JT — Examples. S: ABC Corporation Stock			X								X									X									X
George Wash. Credit Union Accounts				X									X									X							
182 Main Street, Dover, Delaware					X							X									X								
Fidelity Daily Income Trust			X								X										X								
VLSI Tech Stock		X																											X
Conner Peripherals Stock	X																												X
Quantum Corp. Stock	X																												X
Seagate Tech. Stock	X																												X
Cholestech Corp. Stock	X																												X

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Gerry Eastman Studds

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Conner Peripherals Stock	X																													X
	Micropolis Corp. Stock			X																											X
	Isis Pharmaceuticals Stock	X																													X
	Genta Stock			X																											X
	Cytel Corp. Stock	X																													X
	Emulex Corp. Stock			X																											X
	Genus Corp. Stock			X																											X
	Cardiovascular Imaging Sys. Stock			X																											X
	Vitesse Semiconductor Stock			X																											X
	Ikos Systems Stock			X																											X
	Fidelity Select Automotive	X																													X
	Fidelity Contrafund	X																													X
	Fidelity Equity Income II				X							X			X						X										X
	Fidelity Select S & L	X																													X
	Fidelity Select Utilities	X																													X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Gerry Eastman Studds

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Fidelity Short Term Bond			X								X							X								X
Fidelity Spartan High Income			X								X								X							X
Fidelity Short Term World Income	X										X							X								X
Fidelity Sel. Telecommunications	X																									X
Fidelity Sel. Electronics	X																									X
Fidelity Trend			X											X				X								X
Fidelity Sel. Regional Banks	X																									X
Fidelity Sel. Software	X																									X
Fidelity Sel. Medical Delivery			X																							X
Fidelity Spartan Limited Maturity Gov't - (IRA)	X																									X
Fidelity Capital & Income - (IRA)	X										X							X								X
Fidelity Equity Income II - (IRA)			X								X			X				X								
Fidelity Sel. American Gold - (IRA)	X																									X
Fidelity Low Priced Stock - (IRA & SEP)			X											X				X								
Fidelity Investment Grade Bond - (IRA)				X							X								X							X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Gerry Eastman Studds

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Fidelity Sel. Air Transport - (IRA)	X																										X
	Fidelity Sel. Automotive - (IRA)	X																										X
	Fidelity Sel. S & L - (IRA)	X																										X
	Fidelity Europe - (IRA)			X																								X
	Fidelity Value - (IRA)			X																								X

3958

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	VLSI Tech Stock	X			7/13/92	X						
	Conner Peripherals Stock	X			7/9/92	X						
	" " "		X		10/19/92	X						
	Quantum Corp. Stock	X			6/29/92	X						
	" " "		X		10/19/92	X						
	Seagate Tech. Stock	X			6/29/92	X						
	" " "		X		11/6/92	X						
	Cholestech Corp. Stock	X			6/29/92	X						
	" " "		X		8/6/92	X						
	Conner Peripherals Stock	X			6/29/92	X						
	" " "		X		7/6/92	X						
	Micropolis Corp. Stock	X			8/13/92	X						
	Isis Pharmaceuticals Stock	X			10/19/92	X						
	" " "		X		11/16/92	X						
	Genta Stock	X			10/19/92	X						
	Cytel Corp. Stock	X			10/19/92	X						
	" " "		X		11/16/92	X						

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Emulex Corp. Stock	X			10/29/92	X						
	" " "	X			11/5/92	X						
	Genus Corp. Stock	X			11/9/92	X						
	Cardiovascular Imaging Sys. Stock	X			11/17/92	X						
	Vitesse Semiconductor Stock	X			11/19/92	X						
	Ikos Systems Stock	X			11/23/92	X						
	Fidelity Select Automotive	X			3/23/92	X						
	Fidelity Select Automotive → Fidelity Select S & L			X	5/26/92	X						
	Fidelity Contrafund	X			3/30/92	X						
	" "	X			7/20/92	X						
	Fidelity Contrafund → Fidelity Trend			X	9/28/92	X						
	Fidelity Equity Income II	X			5/11/92	X						
	" " " "	X			7/20/92	X						
	Fidelity Select S & L → Fidelity Select Utilities			X	6/22/92	X						
	Fidelity Select Utilities → Fidelity Sel Telecommunications			X	8/10/92	X						
	Fidelity Short Term Bond	X			7/20/92		X					
	Fidelity Spartan High Income	X			7/20/92		X					

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Fidelity Short Term World Income	X			7/20/92	X						
	Fidelity Sel. Telecommunications	X			8/10/92	X						
	Fidelity Sel. Telecommunications → Fidelity Sel. Electronics			X	9/9/92		X					
	Fidelity Sel. Electronics → Fidelity Sel. Regional Banks			X	10/5/92	X						
	Fidelity Sel. Regional Banks → Fidelity Sel. Software			X	10/26/92	X						
	Fidelity Sel. Software → Fidelity Sel. Medical Delivery			X	11/30/92		X					
	Fidelity Short Term World Income → Fidelity Spartan High Income			X	9/28/92	X						
	Fidelity Short Term World Income → Fidelity Short Term Bond			X	11/30/92	X						
	Fidelity Short Term Bond → Fidelity Trend			X	12/21/92	X						
	Fidelity Short Term Bond → Fidelity Equity Income II			X	"	X						
	Fidelity Spartan High Income → Fidelity Equity Income II			X	"	X						
	Fidelity Spartan Limited Maturity Gov't → Fidelity Investment Grade Bond - (IRA)			X	1/6/92		X					
	Fidelity Sel. American Gold → Fidelity Sel. Air Transport - (IRA)			X	2/24/92	X						
	Fidelity Sel. Air Transport → Fidelity Sel. Automotive - (IRA)			X	3/23/92	X						
	Fidelity Sel. Automotive → Fidelity Sel. S & L - (IRA)			X	5/26/92	X						
	Fidelity Investment Grade Bond → Fidelity Europe - (IRA)			X	5/29/92	X						
	Fidelity Capital & Income → Fidelity Value - (IRA)			X	11/30/92	X						

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE IV – TRANSACTIONS

Report any purchases, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Fidelity Select S & L - (IRA)		X		7/20/92	X						

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Seafarers International Union	2/13 - 2/14	Wash, DC - Miami - Boston	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Directors	The Stop AIDS Project, Inc., Boston, MA
Board of Directors, Honor	Massachusetts Vietnam Veterans Memorial Fund
Board of Directors	Cape Cod Center for Environment & Sustainable Economy
Advisory Board of Trustees	Jordan Hospital, Plymouth, MA
Board of Directors	Cape Cod Self-Reliance Corporation
Board of Directors	Cape Cod Symphony Orchestra

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 28.

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

3964

Reporting Individual's Name
Gerry Eastman Studds

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Directors	MA Foundation for Excellence in Marine and Polymer Science

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRY
93 MAY -7 AM 8 15
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(B)

INSIDE MAIL

MC

(Office Use Only)

Bob Stump
(Full Name)

211 Cannon House Office Building
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 202-225-4576

Filer Status: [X] Member of the U.S. House of Representatives — State: Arizona District: Third; [ ] Officer or Employee — Employing Office:

Report Type: [X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (*See* 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: [signature]

DATE (Month, Day, Year): 5-7-93

3966

Reporting Individual's Name

Bob Stump

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Stump Farms	Farm Income	$45,000.00***
	***This is an estimate. I have an extension, and have not yet filed my 1992 income taxes.		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Bob Stump

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
			None	a Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	B	ABC Corporation Stock			X							X								X										X
			George Wash. Credit Union Accounts				X								X									X							
			182 Main Street, Dover, Delaware					X						X									X								
	Stump Farms (See Part 1A)																														
	Beneficial interest in Jesse P. Stump Trust. Trust owns real property in Maricopa County, AZ						X		X											X	X										
	Valley Nat'l Bank accounts Tolleson, Az					X									X									X							

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Bob Stump

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Stock: Desert Sun Bank			X								X							X										
	American Airlines				X							X								X									
	Tenneco			X								X								X									
	Delta Airlines			X								X									X								
	Federal Resources		X									X								X									
	T. G. Shaw Properties			X								X									X								
	South Maountain Gin				X							X										X							
	Life Ins: Union Bankers Ins.			X										X							X								
	IRAs: Seligman Commun&Info Fund			X								X								X									
	Prudential Bache:																												
	America West Airlines		X									X							X										
	Northgate Exploration		X									X							X										
	Money Mart Assets			X										X						X									

Reporting Individual's Name
Bob Stump

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Proprietor	Stump Farms

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 55-535A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17 [illegible]

HAND DELIVERED

me

(5)

(Office Use Only)

Bartholomew (Bart) T. Stupak
(Full Name)

4101 Michigan Shores Drive — 202/225-4735
(Mailing Address) — Daytime Telephone

Menominee, MI 49858

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District 1st	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — Bart Stupak

DATE (Month, Day, Year) — 5-14-93

Reporting Individual's Name

Bart T. Stupak

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Bart T. Stupak, PC	Salary	52,000
	City of Menominee (spouse - Councilwoman)	Salary	2,000
	State of Michigan - Michigan State Police	Disability Pension	14,400

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name: Bart T. Stupak

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation mathod other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X								X									X
			George Wash. Credit Union Accounts			X									X									X						
			182 Main Street, Dover, Delaware				X							X								X								
S	Bart T. Stupak, PC (stock)					X														X										
JT	Office 817 Ninth Ave., Menominee, MI			X										X					rent	X										
JT	Home 4101 Michigan Shores, Menominee						X													X										
JT	Lake Property, Alger Co., MI				X														capital gain		X									sold
JT	Stupak for Congress				X							loan								X										

For additional assets and unearned income, use next page

Reporting Individual's Name

Bart T. Stupak

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
JT	Stephenson National Bank, Marinette, WI	Mortgage on 4101 Michigan Shores			x				
JT	Stephenson National Bank, Marinette, WI	Mortgage on 817 Ninth Ave.		x					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Bart T. Stupak

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Owner/Director	Bart T. Stupak, PC (legal practice)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 25.

Date	Parties To	Terms of Agreement
1/1/92 - 12/15/92	Menominee County, MI and Bart T. Stupak, PC	Provide Court appointed legal services.

GPO: 1992 50-838A (pb)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF PUBLIC RECORD
1993 MAY 13 AM 11:41
U.S. HOUSE OF REPRESENTATIVES

(8)

HAND DELIVERED

(Office Use Only)

(Full Name)	DON SUNDQUIST
	339 Cannon HOB
(Mailing Address)	Washington, D.C. 20515
Daytime Telephone	202-225-2811
Filer Status	[X] Member of the U.S. House of Representatives — State: Tennessee District: Seventh; [ ] Officer or Employee — Employing Office:
Report Type	[X] Annual (May 15); [ ] Amendment; [ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	X	No		
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes	X	No		
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	X	No		
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes		No	X	
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	X	No		
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes		No	X	
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes	X	No		
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes	X	No		
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes		No	X	
Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.					

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes		No	X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes		No	X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Don Sundquist	May 12, 1993

3976

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

Source	Type	Amount
Examples: State College	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Fairfax County Board of Education	Spouse Salary	NA
G.S. America	(Corp. Spouse fees Secretary)	$ 2,000

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Tobacco Institute	speech	2/27/92	$2000.00
Phillip Morris	speech	4/22/92	$2000.00
National Restaurant Assn.	speech	4/2/92	$1000.00
Health 'R Us	speech	6/12/92	$1000.00

This page may be copied if more space is required.

3978

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Transaction (X)
S, DC, JT	Examples:	S ABC Corporation Stock			X								X						X
		George Wash. Credit Union Accounts				X									X				
		182 Main Street, Dover, Delaware					X							X					
JT	Wright Patman Credit Union				X										X				
JT	Community Bank of Germantown (stock)							X					X						
S	Red, Hot 'n Blue Corp. (stock)					X							X						
JT	Red, Hot'n Blue Annapolis (stock)				X								X						
JT	GS America (stock)						X						X						
	Partner/Suntuc (Woodale Condo) Memphis, Tn.					X								X					

BLOCK C Income: Other Income (Specify type)	Category of Amount of Income (X): None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
			X							
					X					
				X						
			X							
	X									
		X								
					X					
					X					
				X						

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: DON SUNDQUIST

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
JT	Community Bank of Germantown			X										X						X									
S	IRA (J.C. Bradford)			X								X								X									
	IRA (J.C. Bradford)			X								X								X									
	G.S. America PS58	X																insurance		X									

3980

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Century Mortgage Co., Fla.	Mortgage on Woodale Condo (4886 Winchester, Memphis)		X					
	GS America	note payable to GS America for purchase of insurance policy		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Ripon Society	May 5-6	Wash.D.C.-NY-Wash DC	Y	Y	none	1 day
	Ripon Educational Fund	Nov 6-12	Wash.D.C-Brussels/ Paris/Wash DC	Y	Y	spouse	5 days

This page may be copied if more space is required.

3982

Reporting Individual's Name
DON SUNDQUIST

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Governors	Fund for American Studies
Executive Committee	G.S. America
Alumni Board	Augustana College
Board of Governors	Capitol Hill Club
Advisor	East Moline Care Center

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1982 50-535A (pb)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

RICHARD NELSON SWETT
(Full Name)

19 DOW RD
BOW, NH 03304
(Mailing Address)

Daytime Telephone (603) 224-6621

Filer Status	[X] Member of the U.S. House of Representatives	State NH District 2ND	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

(8) HAND DELIVERED

(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6 § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8 § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: R. Nelson Swett

DATE (Month, Day, Year): 5/20/93

3984

Reporting Individual's Name
RICHARD NELSON SNETT

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other then the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For e spouse, list the source end amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	TOM LANTOS FOR CONGRESS COMMITTEE	SPOUSE CONSULTING INCOME	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
RICHARD NELSON SWETT

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
NA				

This page may be copied if more space is required.

Reporting Individual's Name
RICHARD NELSON SWETT

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse; or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-18.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset									BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	B	ABC Corporation Stock			X								X									X								X
			George Wash. Credit Union Accounts				X								X										X						
			182 Main Street, Dover, Delaware					X							X									X							
JT	MERRILL LYNCH CMA					X								X								X									
JT	MERRILL LYNCH IRA ACCOUNTS					X									NA								NA								
JT	1st NH BANK, CONCORD NH II					X										X						X									
JT	116 Central AVE, BURLINGAME CA									X				X												X					

For additional assets and unearned income, use next page

Schedule III

3987

Reporting Individual's Name
RICHARD N. SWETT

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	NA											

3988

Reporting Individual's Name
RICHARD N. SWETT

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	GLENDALE FEDERAL SAVINGS & LOAN, CA	MORTGAGE ON 116 CENTRAL AVE			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

3989

Reporting Individual's Name
RICHARD N. SWETT

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American INST. OF ARCHITECT	Nov. 14	Florida - St. Louis - Florida	N	Y	NONE	N
	Conference speaker Reimbursed for plane fare, one meal approx. $500						

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Schedule VII

3990

Reporting Individual's Name
RICHARD N. SWETT

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
NONE	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
NONE		

GPO 1992 88-634A (m)

DICK SWETT
2ND DISTRICT
NEW HAMPSHIRE

PUBLIC WORKS AND
TRANSPORTATION COMMITTEE
SUBCOMMITTEE ON SURFACE TRANSPORTATION
SUBCOMMITTEE ON AVIATION
SUBCOMMITTEE ON ECONOMIC DEVELOPMENT

SCIENCE, SPACE AND TECHNOLOGY
COMMITTEE
SUBCOMMITTEE ON ENERGY
SUBCOMMITTEE ON TECHNOLOGY
ENVIRONMENT AND AVIATION

Congress of the United States
House of Representatives
Washington, D.C. 20515-2902

May 26, 1993

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1993 MAY 26 PM 1:51
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

(2)
MC

The Honorable Donnald Anderson
Clerk of the House
U.S. House of Representatives
1036 Longworth House Office Building
Washington, D.C. 20515

Dear Mr. Anderson,

I am writing with an amendment to my 1992 Financial Disclosure Form.

Since the filing of my report, I have received more detailed information about the reimbursed cost of a trip I made to St. Louis to address a conference of the American Institute of Architects. On my original submission I listed the cost of this trip as "approximately $500". The more detailed information now available to me indicates that the total reimbursement of my travelling costs amounted to $727.00 ($702 for airfare, $25 for a meal).

I have attached a new page (page 7 of 8) incorporating this more detailed information.

With warmest regards,

Dick Swett
Member of Congress

WASHINGTON OFFICE:
230 Cannon Building
Washington, D.C. 20515-2902
(202) 225-5206

CONCORD DISTRICT OFFICE:
18 North Main Street
Concord, NH 03301
(603) 224-8521

NASHUA DISTRICT OFFICE:
5 Coliseum Avenue
Nashua, NH 03063
(603) 880-4142

LITTLETON DISTRICT OFFICE:
127 Main Street
Littleton, NH 03561
(603) 444-1321

recycled paper

* AMENDMENT

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

Reporting Individual's Name: RICHARD N. SWETT

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American Institute of Architects, Conference Speaker Reimbursed for plane fare, one meal; Total: $727.00	Nov. 14	Florida-St. Louis-Florida	N	Y	NONE	N

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1993 MAY 26 PM 1:51
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
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3993

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17 [illegible] 3 57
U.S. HOUSE OF REPRESENTATIVES

(7)

HAND DELIVERED

me
(Office Use Only)

Allan B. Swift
(Full Name)

1502 Longworth Home Office Building
(Mailing Address)

Daytime Telephone

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: Washington District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [x]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [x] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [x]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [x]
Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [x]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [x]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** MAY 17, 93

3994

Reporting Individual's Name
HON. AL SWIFT

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	American Council for Capital Formation Center for Policy Research	Speech	Sep. 30, 1992	$2,000

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Reporting Individual's Name

Allan B. Swift

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S. Government retirement programs For rental property or land, provide the city and a street address or lot number

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details on Schedule IV For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock			X								X									X								X
		George Wash Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
JT	New Economy Fund					X							X										X							
JT	Templeton Growth Fund					X							X			X								X						
S	Apple Federal Credit Union			X											X						X									
	Congressional Federal Credit Union				X										X						X									
JT	First American Bank				X										X							X								
JT	Virginia State Transportation Bonds					X									X							X								

For additional assets and unearned income, use next page

Schedule III

3996

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Allan B. Swift

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.																												
	Mony Annuitant's Withholding Fund 11698828			x									x							x									
	Prudential Insurance Co.			x									x						x										
JT	Nations Bank		x										x						x										
JT	Parking Space, Olympus Condominum 6301 Stevenson Ave., Alex. VA				x							x								x									
JT	Condo Apartment, 3300 Carpenter Rd., Lacey, Washington				x							x											x						
JT	Condo Apartment, 444 South State St., Bellingham, Washington					x						x											x						
	MONEY PURCHASE PENSION PLANS:																												
	Mony Securities Corp.			x								x			x					x									
	MFS Money Market Fund			x								x								x									
	MFS High Income Fund			x								x								x									
	PROFIT SHARING RETIREMENT PLANS:																												
	Mony Securities Corp.				x							x			x					x									
	MFS Money Market Fund			x								x								x									
	MFS High Income Fund			x								x								x									

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Allen B. Swift

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
		Year End Value (X)										Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
	INDIVIDUAL RETIREMENT ACCOUNTS:																											
S	Templeton World Fund		x									x			x					x								
	Templeton World Fund				x							x			x							x						
	Shearson Lehman Brothers ~~181-60199-11~~			x								x			x						x							

Reporting Individual's Name
Allan B. Swift

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	First Interstate Mortgage Co, Pasadena, CA	Mortgage on Condo Apt, 444 S. State St., Bellingham, WA		x					
JT	Bancboston Mortgage Corp Jacksonville, FL	Mortgage on Condo Apr, 6301 Stevenson Ave., Alex, VA				x			
JT	First American Bank of Virginia McLean, VA	Line of Credit		x					
JT	Jeanette Allen	Mortgage of Condo Apt, 3300 Carpenter Rd., Lacy, WA	x						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

3999

Reporting Individual's Name
HON. AL SWIFT

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Nat. Resources Defense Council	Jan. 4 - 11,93	DC - Brussells - Bonn	Y	Y	None	N
	Open Space Institute German Marshall Fund of US	" "	- Munich - The Hague	"	"	"	"
	Waste Management, Inc. Inst. for Scrap Recycling	" "	- DC	"	"	"	"
	Nat. Solid Waste Management Assn.	" "	" "	"	"	"	"
	Phillip Morris	Feb. 15-18, 93	Seattle - W. Palm Beach - DC	Y	Y	Spouse	N
	Pockrass Lecture - Penn. State University	Apr. 2 - 3, 93	DC - University Park - DC	Y	Y	None	N
	Electronic Industries Assn.	Apr. 13-16, 93	DC - Fort Myers - Seattle	Y	Y	Spouse	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17

Michael Lynn Synar
(Full Name)

2329 Rayburn House Office Building
(Mailing Address)

202-225-2701
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: OK District: 02	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

HAND DELIVERED

mc
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file the report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Michael Lynn Synar

DATE (Month, Day, Year): 5-13-93

4001

Reporting Individual's Name
Michael Lynn Synar

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Glaxo, Inc.	Speech	April 28, 1992	$2,000

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4002

Reporting Individual's Name
Michael Lynn Synar

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
	Pioneer II Mutual Fund					X							X									X							
	Europacific Growth Fund (mutual fund)					X							X			X									X				
	20 acres of unimproved residential ~~property (College View Edition)~~, Muskogee, OK						X						NONE							X									
	1/3 interest in 140 acres unimproved agriculture, Muskogee, OK							X					NONE							X									
	Livestock--Muskogee, OK						X						NONE							X									

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Michael Lynn Synar

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Individual Retirement Account, Legg Mason, Baltimore, MD				X							X										X							
	Individual Retirement Account, AMCAP Fund, Capital Guardian, Brea, CA			X								X									X								
	Individual Retirement Account, NW Mutual Life, Milwaukee, WI (roll-over from prior HR10)				X							X		X						X									
	Wright Patman Congressional Federal Credit Union			X										X							X								

Schedule III—Continuation

4004

Reporting Individual's Name
Michael Lynn Synar

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Federal Land Bank, Broken Arrow, OK	Loan for 80 acres	X						
	Federal Land Bank, Broken Arrow, OK	Loan for 60 acrea	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
Unknown	Indian Blanket	Unknown

Use additional sheets if more space is required.

Reporting Individual's Name
Michael Lynn Synar

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Western States Land Commissioners	Jan. 5-6	Wash., DC-SanAntonio-Wash., DC	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
Michael Lynn Synar

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner	Synar Land & Cattle Co., Muskogee, OK
Consultant	Eastern Oklahoma Land & Cattle Co., Muskogee, OK
Director	Clara Noe Foundation, Tulsa, OK

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 89-326A (pb)

MIKE SYNAR
2D DISTRICT OKLAHOMA

COMMITTEES
ENERGY AND COMMERCE
JUDICIARY
GOVERNMENT OPERATIONS

Congress of the United States
House of Representatives
Washington, DC 20515-3602

WASHINGTON OFFICE
2329 RAYBURN HOUSE OFFICE BUILDING
WASHINGTON DC 20515-3602
(202) 225-2701

DISTRICT OFFICE
2822 FEDERAL BUILDING
125 SOUTH MAIN STREET
MUSKOGEE OK 74401
(918) 687-2533

(1)

May 20, 1993

INSIDE MAIL

MC

Donnald K. Anderson
Clerk of the House
H-105
Washington, DC 20515

Dear Donn:

I am writing to request that the Committee allow me to amend my Financial Disclosure statement for 1992.

In the schedule VI (Gifts) section, an indian blanket from an unknown source and for an unknown amount was listed. Upon further research, we have determined that the blankets value falls well below the $250.00 limit. For this reason, I am asking that this item be removed from the Gifts section of my disclosure statement.

If you have any questions concerning this request, please do not hesitate to contact me or Wendi Jones in my office.

Thank you for your prompt attention to this matter.

Sincerely,

Mike Synar

MIKE SYNAR, M.C.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

James M. Talent
(Full Name)

15739 Cedarmill Drive (202) 225-2561 / (314) 872-9561
(Mailing Address) Daytime Telephone

Chesterfield, Mo 63017

Filer Status	[X] Member of the U.S. House of Representatives — State: Missouri District: 2ND	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

(7)

MAY 17 1993
(Office Use Only)

4009

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: James M Talent

DATE (Month, Day, Year): 5-16-93

Reporting Individual's Name
James M. Talent

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of Missouri	Legislative salary	$24,363
	Lashly & Baer, P.C., St Louis, Missouri	Of counsel income	$ 12,000
	Missouri Hospital Association (May 20, 1992)	Speech	$ 500
	Bryan Cave, St. Louis, Missouri	Spouse income	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4010

Reporting Individual's Name: James M. Talent

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X						X
	George Wash. Credit Union Accounts				X									X				
	182 Main Street, Dover, Delaware					X							X					
	Merrill Lynch CMA Money Fund			X								X						
	Exxon Corporation Stock			X								X						
	Giant Food Inc. Stock			X								X						
	Mfg. Hanover Corp. Stock			X								X						
	Chemical Banking CP Stock (received in exchange for Mfg. Hanover)			X								X						
	Royal Dutch Petroleum Stock			X								X						

BLOCK C Income: Other Income (Specify type)	Category of Amount of Income (X): None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
Examples:										
			X							
					X					
				X						
			X							
			X							
			X							
		X								
		X								
			X							

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James M. Talent

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Wal Mart Stores Inc. Stock			X								X								X									
	Loan -- Talent for US Congress				X													N/A	X										
	Lashly & Baer, P.C. retirement plan			X														N/A				N/A							
	Merrill Lynch Prime Fund			X								X									X								
	Avon Products Inc. Stock			X								X								X									
S	Fidelity Puritan Fund			X														N/A				N/A							
	Oppenheimer High Yield Fund			X														N/A				N/A							
DC	Oppenheimer High Yield Fund			X								X									X								
DC	Oppenheimer High Yield Fund			X								X								X									
	Vanguard -- GNMA Fund			X								X								X									
	Mercantile Bank Accounts, St. Louis			X										X							X								
	Boatmen's Nat'l Bank Accounts, St. Louis				X									X							X								
	Wendy's Int'l Inc. Stock			X								X								X									
	Rockwood School District Bonds			X										X						X									
DC	Shawmut National Corp Stock			X								X							X										

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James M. Talent

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	
S	Bryan Cave (Partnership Interest)			X														N/A	X		Sch. I reflects distribution of earned income								
S	Bryan Cave retirement plan			X														N/A			N/A								
	Missouri State Pension			N/A														N/A			N/A								
DC	Milton O. Talent Irrevocable Trust*				X							X									X								
	(DCs currently have a 1/4 interest in the Trust, their interest will change if the number of grandchildren change. The values and income reflected are based on the DCs' interest.)																												
DC	J.M. Manville Preferred Stock			X								X							X										
DC	J.M. Manville Stock			X								X									X								
DC	Waste Management Stock			X								X								X									
DC	Wheelabrator Technology Stock			X								X								X									
DC	Allstar Inns LP			X								X								X									
DC	Chantal Pharm. Stock			X								X							X										
DC	Luther Medical Prod. Stock			X								X							X										
DC	Georgia-Bonded Fiber Stock			X								X							X										
DC	Health-Chem Corp. Stock			X								X							X										
DC	Service Fracturing Co. Stock		X									X							X										

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: James M. Talent

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
DC	Barrett Resources Stock		X									X						X										
DC	Spartech Corp. Stock			X								X						X										

Reporting Individual's Name
James M. Talent

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Legislator	State of Missouri
Of counsel	Lashly & Baer, P.C. (resigned 12/31/92)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
12/31/92	Lashly & Baer, P.C.	Continued participation in 401k plan (No contributions by Lashly & Baer or member after 1992. Also no agreement to return after Congressional service. Plan assets of member to be rolled over into IRA.)

GPO 1992 50-638A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 PM 1:19

(9)

HAND DELIVERED

MC

(Office Use Only)

John Tanner
(Full Name)

1427 Longworth House Office Building
(Mailing Address)

Washington, D.C. 20515 — Daytime Telephone: 202 225-4714

Filer Status	[X] Member of the U.S. House of Representatives	State: Tennessee District: 8	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	XX	
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**		
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**		
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	XX	
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	X	
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**		XX
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	XX	
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	XX	
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**		XX

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

Question	Yes	No
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)		XX
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)		XX

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — **DATE (Month, Day, Year)**: May 12, 1993

Reporting Individual's Name

John Tanner

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Union City Insurance Company Union City, Tennessee (Family Owned Business)	Fee	$8,000.00
	Tennessee National Guard Nashville, Tennessee	Salary	8,174.26
	Fuller Partners Realty Union City, Tennessee	Spouse Salary	6,394.50

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name

John Tanner

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Phillip Morris Companies, Washington, D.C.	Speech	March 5, 1992	$2,000.00
Smokeless Tobacco Council, Washington, D.C.	Speech	June 3, 1992	$1,000.00
Textron Corporation, Washington, D.C.	Speech	June 18, 1992	$1,000.00

This page may be copied if more space is required.

Reporting Individual's Name

John Tanner

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs For rental property or land, provide the city and a street address or lot number

In BLOCK B indicate the category of value for each asset listed in Block A If you use a valuation method other than fair market value, explain the method used If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income You must, however, name the institution holding the IRA

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X								X								X
	George Wash. Credit Union Accounts				X									X									X					
	182 Main Street, Dover, Delaware					X							X									X						
	Dean Witter/Sears Liquid Assets			X															X									
	Union City Insurance Company Stock				X												Fee						X					
	Merchant State Bank Accounts (Previously reported as Metropolitan Federal Savings and Loan Accounts.			X										X						X								
	Raymond James & Associates IRA					X							N/A--IRA								N/A--IRA							X
	State of Tennessee Pension Plan (Vested Interest)			X								N/A											N/A					

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Note Payable from Mr. Bob Hunt				X									X								X	X					
	Reelfoot Bank Accounts				X									X							X							
	Note Payable from Mr. Jim Pierce			X									(NON)										NONE					
	37.5% interest in an unimproved Lot in Union City, Tennessee			X										NON										NON				
	(Inadvertently omitted from previous reports).																											

Schedule III – Continuation

4020

Reporting Individual's Name
John Tanner

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000 Include transactions that resulted in a loss Do not report a transaction between you, your spouse or your dependent child or the purchase or sale of your personal residence, unless it is rented out For further information, see Instructions, page 20

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				
	Raymond James and Associates, Union City, Tennessee IRA			X			X					
	This is an exchange of funds received from the pension plan of Metropolitan Federal Savings and Loan. These funds were rolled over into the IRA				9-25-92							

Schedule IV

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Reporting Individual's Name: John Tanner

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Reelfoot Bank, Union City, Tennessee	Personal Note		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

4022

Reporting Individual's Name
John Tanner

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
American Airlines		Jan. 24-26, 199	Nashville, TN--Chicago Ill.---Minneapblis, MN	Y	Y	Son	None
			---Chicago, Ill.--Nashville, Tennessee				
Electronic Industries Assn.		April 12-15, 1992	Nashville, Tn.--Ft. Myers, Fla.--Nashville TN.	Y	Y	Spouse	One
Opportunities, Inc.		Aug. 12-13 1992	Air Travel from Wash. D.C. to Texarkana, Ark. to participate in charity event.	Y	Y	Son	None

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Reporting Individual's Name
John Tanner

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Vice-President	Union City Insurance Company (FAMILY OWNED BUSINESS)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
NONE		

GPO 1992 88-838A (m)

4024

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 17 PM 2 19

Wilbert Joseph Tauzin, II
(Full Name)

2330 Rayburn Building
(Mailing Address)

202/225-4031
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: LA District: 03	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED
(Office Use Only)

4025

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependant child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Wilbert Joseph Tauzin, II	May 14, 1993

Reporting Individual's Name
Wilbert Joseph Tauzin, II

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	N/A		

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Wilbert Joseph Tauzin, II

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See instructions, page 13

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
US Tobacco	Speech	Jan. 3, 1992	$1,000
Securities Industries Association	Speech	March 3, 1992	$2,000
ACCF-American Council for Capital Formation	Speech	April 27, 1992	$1,000
American Bankers Association	Speech	April 29, 1992	$1,000
Chemical Manufacturers Association	Speech	May 7, 1992	$2,000
Northern States Power	Speech	June 15, 1992	$1,200

This page may be copied if more space is required.

Reporting Individual's Name: Wilbert Joseph Tauzin, II

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X									X
		George Wash. Credit Union Accounts				X									X									X							
		182 Main Street, Dover, Delaware					X							X									X								
	State Mutual Life Insurance					X									X							X									
	Wright Patman Credit Union				X								X								X										
	Secor Bank IRA					X									X							X									
	Putnam IRA High Yield Trust				X										X							X									
	First Interstate Bank of S. LA				X										X							X									
	IRA																														

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Wilbert Joseph Tauzin, II

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
St. Charles Royalle Subdivision																											
Lots (See attachment)					x											note paymts.*				x							Note paymts lots
Lots																1/3 ptnr interest			x								prtnrship distributn.
* Bond for deed payments on																											
Woods lot (Lot 2A, Block one)																											
(Last yr. listed as Lot 2B, Block one)																											
* Bond for deed paymenta on																											
Turner lot (Lot 2C, Block one)																											

Reporting Individual's Name

Wilbert Joseph Tauzin, II

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				

Reporting Individual's Name

Wilbert Joseph Tauzin, II

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	US Tobacco	1/2-6	DC/Boca Raton/Orlando	Y	Y	Fiancee'	N
	Keystone Center	1/6-12	Orlando/ Keystone, CO/New Orl.	N	Y	None	3 days
	Keystone Center	4/2-5	DC/Keystone/DC	Y	N	None	N
	Natl. Assn. of Broadcstrs	4/12-14	DC/Las Vegas/Phoenix/NO	Y	Y	Daughter	N
	Marine Preservation	4/14-15	Held in Phoenix	Y	Y	None	N
	Securities Industries	5/14-15	DC/NYC/DC	Y	Y	None	N
	Northern States Power	6/14-15	DC/Minneapolis/DC	Y	Y	Fiancee'	N
	Securities Industries	7/3-4	DC/NYC/DC	Y	Y	Son	N
	Entergy	10/13-15	DC/White Sulphur Spgs./DC	Y	Y	Fiancee'	N
	Peabody Coal	10/21-26	DC/Sheridan,WY/DC	Y	Y	None	2 days
	US Telephone	11/12-15	DC/Key West/DC	Y	Y	Fiancee'	N

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Reporting Individual's Name
Wilbert Joseph Tauzin, II

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	First Natl. Bank of Houma, Louisiana	Mortgage on 4836 Kingston Dr.							
		Annandale, VA				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Wilbert Joseph Tauzin, II

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Congressional Chairman	Keystone Energy Futures Board (non-profit, public policy organization)
Partner	St. Charles Royalle Subdivision;Lafourche Parish, Louisiana
	Partnership dissolved October, 1992

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 92-638A (pa)

St. Charles Subdivision Interest

Changes from 1991 Financial Disclosure Statement are the deletion of Paragraph 4 and share of interest changed to 1/6 pursuant to division of property in 1992.

An undivided 1/6 interest in and to the minerals in, on and underlying the following described prperty situated in Lafourche Parish, Louisiana to wit:

North One Half (N/½) of Lot Four (4), Lots Three (3), Two-A (2-A), Two-D (2-D), Two-E (2-E), South Half (S/½) of Lot Two-G (2-G) and Lot Two-H (2-H), Block One (1);

Lots Four (4), Five (5) and Eleven (11) of Block Two (2);

Lots Seven (7), Eight (8), Ten (10) and Twelve (12) of Block Three (3);

Lots Six (6), Eight (8), Nine (9), Eleven (11), Thirteen (13), Fifteen (15) and the North Sixty-seven and 25/100 (N/67.25') feet of Lot Sixteen (16) of Block Four (4);

Lots Three (3), Four (4), Five (5), Six (6), Seven (7), Eight (8), Nine (9) and Ten (10) of Block Five (5);

Lots One (1), Two (2), Three (3), Four (4), Five (5), Six (6), Seven (7), Eight (8), Nine (10), Ten (10), Eleven (11), Twelve (12) and Thirteen (13) of Block Six (6);

The South Half (S/½) of Lot Two (2) and Lots Three (3), Four (4), Seven (7), Eight (8), Nine (9), Ten (10), Eleven (11), Twelve (12), Thirteen (13), Fourteen (14), Fifteen (15), Eighteen (18) and Twenty (20) of Block Nine (9);

Lots Two (2), Three (3), Four (4), Five (5), Ten (10), Eleven (11), Thirteen (13) and the South Half (S½) of Lot Nine (9) of Block Ten (10);

Lots One (1) and Two (2) of Block Eleven (11).

All as more clearly shown on a Survey Map Showing St. Charles Royalle Subdivision, situated in Sections Twenty-one (21) and Twenty-two (22), Township Fifteen (15) South, Range Seventeen (17) East, LaFourche Parish, State of Louisiana, said Map being recorded under Entry No. 593700 of the Records of LaFourche Parish and dated January 7, 1974, revised February 5, 1975, and August 25, 1983.

The following described property located in Lafourche Parish, Louisiana:

Lot Ten (10) of Block Three (3);

Lots Six (6), Ten (10), Twelve (12), Fourteen (14) and the North Sixty-seven and 25/100 (N/67.25') feet of Lot Sixteen (16), of Block Four (4);

Lots Six (6) and Seven (7) of Block Five (5);

Lots Four (4), Six (6), Ten (10), Twelve (12) and Thirteen (13) of Block Six (6);

Lots Eight (8), Twelve (12) and Fourteen (14) of Block Nine (9);

The South Half (S½) of Lot Nine (9) and Lots Ten (10) and Thirteen (13) of Block Ten (10);

Lot Two (2) of Block Eleven (11).

All as more clearly shown on a Survey Map Showing St. Charles Royalle Subdivision, situated in Sections Twenty-one (21) and Twenty-two (22), Township Fifteen (15) South, Range Seventeen (17) East, LaFourche Parish, State of Louisiana, said Map being recorded under Entry No. 593700 of the Records of LaFourche Parish, and said map being dated January 7, 1974, and revised February 5, 1975, and August 25, 1983.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 3:49

HAND DELIVERED

mc (Office Use Only)

Charles Hart Taylor
(Full Name)

516 Cannon House Office Building
(Mailing Address)

202-225-6401
Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives	State: NC District: 11th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS -- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION -- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Charles H. Taylor

DATE (Month, Day, Year) 5-17-93

4036

Reporting Individual's Name

SCHEDULE I – EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For e spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Financial Guaranty Corporation	Spouse Director Fee	N/A
	Financial Guaranty Corporation	Spouse Guaranty Fee	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name: Charles Hart Taylor

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X							
JT	Southeastern Real Estate & Discount Company									X								Business Income									X			
JT	Transylvania Tree Farms									X								Business Income								X				
S	Major Land & Timber Partnership Owning tree farm, @3500 acres									X								None												X
	Haywood, NC and																													
	Note recievable from Maggie Valley Development Corporation							X						X												X				
DC	RFD Old 64, Brevard, NC House				X								X										X							

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Charles Hart Taylor

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S DC JT	Blue Ridge Savings Bank Accounts				X									X										X					
S	Blue Ridge Savings Bank Stock							X										none											
	Notes Receivable from Bank Properties, Inc.				X									X								X							
S DC JT	Financial Guaranty Corp. Stock									X								none											X
	Note Receivable From Financial Guaranty Corp.			X										X										X					
	McCrae Industries Stock		X									X								X									X
S	Monte Vista Corporation Stock								X									none											
JT	Riverside Company Estate Partner-				X													none											
	ship owning Riverside Estates, Brevard, NC																												
JT DC	Taylor Family Trust (Farm in Transylvania Co., NC)								X									none											
	Haywood Savings Bank, Waynesville			X								X								X									
	Gaybo Company Partnership, owning commercial land, Maggie Valley, NC						X								X			Land Sales							X				X
	Cedar Creek Farms Partnership owning Cedar Creek Farms, Jackson					X									X									X					
	Co. NC and notes receivable from Thompson et.al.			X										X							X								
	Taylor for Congress					X												none											

Reporting Individual's Name: Charles Hart Taylor

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	McCrae Industries Stock		X		12.31.92		X					
S,JT DC	Financial Guaranty	X			5.15.92 6.29.92			X				
					7.27.92							
S	Major Land and Timber		X		4.30.92			X				
	Gaybo Company Partnership (First Installment)		X		9.03.92		X					

Reporting Individual's Name: Charles Hart Taylor

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
DC	Brevard Federal Savings and Loan	Mortgage on RFD old 64 House		X					
	Hal Starnes - Asheville, NC	Installment purchase note			X				
	Nations Bank	Guarantor - Campaign Loan		X					
	First Citizens Bank	Guarantor - Campaign Loan			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives; gifts of personal hospitality of an individual; and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
	(see attached schedule)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1982 50-638A (m)

SCHEDULE VIII POSITIONS

CHARLES H. TAYLOR
516 Cannon Building
Washington, D.C. 20515

Position	Organization
Partner	Gaybo Company (see Schedule III)
Partner	Cedar Creek Farms (see Schedule III)
Partner	Riverside Company Estates (See Schedule III)
Director (non-compensated)	North Carolina 4-H Development Fund
Director (non-compensated)	Western Carolina 4-H Leadership Fund
Member	Society of American Forestry
Director (non- compensated)	"Cradle of Forestry" Interpretive Association
Member	North Carolina Forestry Association

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
RECORDS & ... SEARCH
MAY 19 '93 8:03

(1)

GARY EUGENE TAYLOR
(Full Name)

814 NORTH BEACH BLVD.
(Mailing Address)

BAY ST. LOUIS, MS. 39520

Daytime Telephone: 202-225-5772

Filer Status	☑ Member of the U.S. House of Representatives — State: MS District: 05	☐ Officer or Employee	Employing Office:
Report Type	☑ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date:

MC (Office Use Only)

4044

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes ☐	No ☑	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes ☐	No ☑
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes ☐	No ☑	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes ☐	No ☑
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes ☐	No ☑	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes ☐	No ☑
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes ☐	No ☑	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes ☐	No ☑
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes ☐	No ☑	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes ☐	No ☑
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes ☐	No ☑

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Gary Taylor M.C.	**DATE (Month, Day, Year)** 5/14/93

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 1:37

FRANK M. TEJEDA
(Full Name)

323 CANON HOUSE OFFICE BLDG
(Mailing Address)

(202) 225-1640
Daytime Telephone

WASHINGTON, D.C. 20515-4328

Filer Status	[X] Member of the U.S. House of Representatives	State: TEXAS District: 28	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

mc DELIVERED
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? If yes, Complete and Attach Schedule I.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? If yes, Complete and Attach Schedule VI.	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach Schedule II.	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, Complete and Attach Schedule VII.	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, Complete and Attach Schedule III.	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach Schedule VIII.	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, Complete and Attach Schedule IV.	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach Schedule IX.	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, Complete and Attach Schedule V.	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [ ]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Frank M. Tejeda

DATE (Month, Day, Year):

4045

Reporting Individual's Name

FRANK M. TEJEDA

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

Source	Type	Amount
Examples: State College	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Fairfax County Board of Education	Spouse Salary	NA
SENATE OF TEXAS	SALARY	6,852
FRANK TEJEDA-ATTORNEY	LEGAL REFERRALS	212,784

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
FRANK M. TEJEDA

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X								X									X
			George Wash. Credit Union Accounts				X								X								X							
			182 Main Street, Dover, Delaware					X						X										X						
	TEJEDA FOR CONGRESS (LOAN)					X													ACCT. REC.	X										

... earned Income, use next page

Reporting Individual's Name
FRANK M. TEJEDA

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	UNION BANK-SAN ANTONIO, TEXAS	PERSONAL LOAN			X				
	ALLAN POLUNSKY-SAN ANTONIO, TEXAS	PERSONAL LOAN	X						
	JAMES LEININGER-SAN ANTONIO, TEXAS	PERSONAL LOAN		X					
	FROST BANK-SAN ANTONIO, TEXAS	PERSONAL LOAN		X					
	NATIONS BANK-SAN ANTONIO, TEXAS	PERSONAL LOAN			X				
	TERRY SAMUELS-SAN ANTONIO, TEXAS	PERSONAL LOAN	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

4048

Reporting Individual's Name

FRANK M. TEJEDA

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	UNION NATIONAL BANK-SAN ANTONIO, TEXAS	PERSONAL LOAN		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
FRANK M. TEJEDA

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
MEMBER-BD OF DIR.	HARLANDALE SPORTS ASSOCIATION
CHAIRMAN	ADVISORY COMMITTEE FOR S.A. POLICE OFFICERS ASSOC. MEMORIAL SCHOLARSHIP FUND

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 88-938A (pm)

4050

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 11 13 3 35

CRAIG LYLE THOMAS
(Full Name)

1019 LONGWORTH HOUSE OFFICE BUILDING 202-225-2311
(Mailing Address) Daytime Telephone

WASHINGTON DC 20515

MC (10)

HAND DELIVERED

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State Wyoming District At Large	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Craig Thomas

DATE (Month, Day, Year): 11 May 93

Reporting Individual's Name
CRAIG THOMAS

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Arlington County School District	spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name
CRAIG THOMAS

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples. S ABC Corporation Stock			X								X							X
	George Wash. Credit Union Accounts				X									X					
	182 Main Street, Dover, Delaware					X							X						
	AT:T (stock)			X								X							
	Honeywell (stock)			X								X							
	Kemper Cash Equivalent (shares)		X									X							
	National Security Fund (shares)			X								X							
	Caterpillar Common (stock)			X								X							
	Aspen Exploration		X									X							

Asset	Category of Amount of Income (X): I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000
ABC Corporation Stock			X							
George Wash. Credit Union Accounts					X					
182 Main Street, Dover, Delaware				X						
AT:T (stock)			X							
Honeywell (stock)			X							
Kemper Cash Equivalent (shares)		X								
National Security Fund (shares)	X									
Caterpillar Common (stock)		X								
Aspen Exploration	X									

For additional assets and unearned income use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG THOMAS

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
Zero Coupon Bonds			X										X					X										
ECC International (stock)		X									X							X										
Kemper Total Return Fund			X								X									X								
Kemper Growth Fund				X							X								X									
Alliance Fund					X						X										X							
CEF (money market - broker cash flow)			X										X						X									
Alliant Techsystems (stock)		X									X							X										
*Louise Roberts Trust (1/5 interest)					X						X										X							
Key Bank (c.d.) (casper)			X										X							X								
Hilltop Bank (c.d.) (casper)			X										X							X								
Congressional Federal Credit Union (checking)			X										X						X									
Congressional Federal Credit Union (c.d.)				X									X								X							
Sergeant At Arms (deferred savings)				X									X					X										
Arlington School Credit Union			X										X							X								
Sandy City, Utah, Dist #90-1, (municipal bond)			X								X							X										X

Schedule III – Continuation

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SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG THOMAS

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Listing of Louise Roberts Trust																											
Kemper Cash Equivalent Fund			X								X									X							
AT:T (stocks)			X								X									X							
H:R Block (stocks)			X								X									X							
Dun:Bradstreet (stocks)				X							X									X							
Exxon Corporation (stocks)			X								X									X							
General Electric (stocks)			X								X									X							
Honeywell (stocks)				X							X									X							
Houston Industries (stocks)			X								X									X							
Petrie Stores (stocks)			X								X									X							
Pillsbury (stocks)			X								X									X							
Union Pacific (stocks)			X								X									X							
Western Investors Real Estate (limited partnership)			X								X									X							
Sweetwater County Wyoming Pollution Control (revenue bonds)			X								X									X							
Uinta County Wyoming School District Bonds			X								X									X							
Yavapai County Arizona School District Bonds			X								X									X							

Schedule III – Continuation

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG THOMAS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
A-C Partners (partnership)					X								X								X							

Page 6 of 10

Schedule III – Continuation

Reporting Individual's Name
CRAIG THOMAS

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Sandy City Utah District #90-1 municipal bond	X			9-1-92	X						

Page 7 of 10

Schedule IV

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Reporting Individual's Name
CRAIG THOMAS

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Wyoming National Bank	Mortgage on 3907 Dorset, Casper, Wy			X				
	Crestar Bank	Mortgage on 4221 South 35th St. Arlington, VA				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
CRAIG THOMAS

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American Medical Association	Feb 28-29	Wash. DC - West Palm Beach Fla - Denver Co	Y	Y	NONE	N
	Multistate Tax Commission	July 23-24	Wash. DC - Kansas City, Mis. - Casper Wy	Y	Y	NONE	N
	Tri-State Generation & Transmission	Nov 8-9	Laramie Wy - Denver, Co - Casper Wy	Y	Y	NONE	N

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Reporting Individual's Name
CRAIG THOMAS

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner, general	A-C-Torrington Venture

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1982 56-536A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 PM 3:50

(6)

William M. Thomas
(Full Name)

2209 Rayburn House Office Building
(Mailing Address)

(202) 225-2915
Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: California District: 21	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

HAND DELIVERED
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: William M. Thomas

DATE (Month, Day, Year): 05-15-93

4061

Reporting Individual's Name

William M. Thomas

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Association of American Railroads	Speech	Jan. 25, 1992	$2,000

This page may be copied if more space is required.

Reporting Individual's Name
William M. Thomas

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST / QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC JT — Examples: S — ABC Corporation Stock				X								X								X								X
George Wash. Credit Union Accounts					X								X									X						
182 Main Street, Dover, Delaware						X						X									X							
1/8 interest in 15836 Mt. View, Nevada City, CA (inherited)				X								X									X							
Teacher Retirement STRS California				X														X										

For additional assets and unearned income, use next page.

Reporting Individual's Name

William M. Thomas

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Santa Rosa Municipal Bonds		X		01-04-92	X						

Reporting Individual's Name: William M. Thomas

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Institute of Politics; University of Southern California	Jan. 22-23	Bakersfield - Los Angeles - Bakersfield	Y	N	None	N
	Association of American Railroads	Jan. 25-26	Bakersfield - Indian Wells - Los Angeles	Y	Y	None	N
	American Bar Association Standing Committee on Election Law	June 4-7	Bakersfield - Santa Fe, NM - Washington, D.C.	Y	Y	Spouse	N
	American Bar Association Standing Committee on Election Law	Nov. 6-7	Bakersfield - Santa Monica - Bakersfield	Y	Y	None	N
	Nat'l Ass'n of Business PAC; Post Election Perspective	Nov. 12-15	Bakersfield - Phoenix, AZ - Wash., D.C.	Y	Y	Spouse	N
	Donahue Television Program	Dec. 21	Wash., D.C. - New York - Wash., D.C.	N	N	None	N

This page may be copied if more space is required.

Reporting Individual's Name
William M. Thomas

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
N/A	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
1974	Kern Community College District	On leave without pay

GPO 1988 [illegible]

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
93 MAY 26 AM 11:17
CLERK
U.S. HOUSE OF REPRESENTATIVES

Bennie Gordon Thompson
(Full Name)

103 L.C. Turner Circle, Bolton, Mississippi 39041
(Mailing Address) Daytime Telephone

MAY 17 1993
MC 8
(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: Mississippi District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Bennie G. Thompson

DATE (Month, Day, Year): 5/17/93

4067

Reporting Individual's Name
Bennie G. Thompson

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Hinds County Board of Supervisors	Salary	24,000
	Hinds County Schools	Spouse Salary	N/A
	Town of Bolton Development Corporation	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4068

Reporting Individual's Name

Bennie G. Thompson

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		A None	B Less than $1,001	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X								X									X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delewere					X							X									X							
S	Jackson Fed. Credit Union			X										X					X										
	Jackson Fed. Creditt Union				X									X						X									
S	Deposit Guaranty National Bank		X											X					X										
S	Magnolia Federal Bank				X									X								X							
	Magnolia Federal Bank				X									X					X										
JT	Dibernia National Bank		X									X							X										

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Bennie G. Thompson

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	3838 Brame, Jackson, MS				X								X									X	(GROSS)					
JT	4257 Johnson Crt, Jackson, MS				X								X									X	(GROSS)					
JT	3539 Brame, Jackson, MS				X								X									X	(GROSS)					
	Chalet Village, Ltd Ptrn (20%)							X										Partner-ship Income						X	(GROSS)			
	T & T Properties Ptrn (50%)				X													Partner-ship Income				X	(GROSS)					
JT	Deposit Guaranty National Bank			X										X					X									
S	State of MS Empl. Ret. Plan				X								N/A															
	State of MS Empl. Ret. Plan				X								N/A															
S	MS Def. Compensation Plan			X									N/A															
S	Transamerica Life (Cash Value)			X										X						X								
S	The Equitable Retirement Plan			X								X		X						X								
JT	Lot, 101 L C Turner Cir, Bolton, MS			X											X				X									
JT	Lot, 105 L C Turner Cir, Bolton, MS			X											X				X									
JT	Lot, Pearl St., Bolton, MS			X											X				X									
	Dwelling, 212 Sharon, Bolton, MS				X										X				X									

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Bennie G. Thompson

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	2 acres, Northside Dr, Bolton, MS			X											X				X										
	3 acres, Mt. Olive Rd, Bolton, MS			X											X				X										
	1 acre, Old Fair Grnd Rd, Edwards, MS			X											X				X										

Schedule III – Continuation

Reporting Individual's Name: Bennie G. Thompson

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Bank of Mississippi	Mortgage on 3539 Brame Street	X						
JT	Colonial Mortgage Company	Mortgage on 4257 Johnson Crt	X						
JT	Bailey Mortgage Company	Mortgage on 3838 Brame Street	X						
	Trustmark National Bank	Mortgage on T & T (Ptrn)		X					
	Deposit Guaranty Naitonal Bank	Mortgage on Chalet Village (Ptrn)				X			
	Omni Bank	Mortgage on Chalet Village (Ptrn)		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waivar received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Bennie G. Thompson

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Tougaloo College Economic Development Corporation
Board Member	Housing Assistance Council
Board Member	South Reginal Council
Board Member	First American National Bank
Partner	Chalet Village, Ltd.
Partner	T & T Properties

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1982 56-638A (m)

Reporting Individual's Name
Bennie G. Thompson

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	BLB Properties
Trustee	Tougaloo College Board of Trustees

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 50-638A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 14 AM 3 32

(6)

MC

INSIDE MAIL

(Office Use Only)

Ray Thornton
(Full Name)

1214 Longworth H.O.B.
(Mailing Address)

202-225-2506
Daytime Telephone

Washington, DC 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: Arkansas District: Second	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [XX]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [XX]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [XX]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [XX] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [XX]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [XX]
Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [XX]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [XX]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [XX]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [XX]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report, may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Ray Thornton	**DATE (Month, Day, Year)** May 13, 1993

4075

Reporting Individual's Name
Ray Thornton

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)									BLOCK C Income: Type of Income (X)						Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X								X							
			182 Main Street, Dover, Delaware					X						X										X						
			RESIDENTIAL AND RENTAL PROPERTY: House, 301 N. Main, Sheridan, AR				XX							XX										XX						
			Duplex, 305 N. Main, Sheridan, AR				XX							XX										XX						
			House, The Bluffs, Baxter County, AR				XX									XX										XX				XX
			Condominium, Fairfield Bay, Van Buren County, AR				XX												NO INCOME												XX
			House, 1712 Georgia, Little Rock, AR				XX												NO INCOME												
			TIAA-CREFF					XX											PENSION							XX				

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ray Thornton

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $1,000,000	
CHECKING ACCOUNTS, WORTHEN NATIONAL BANK, LITTLE ROCK, AR			X										X							X							
UNIMPROVED LAND, GRANT COUNTY, AR: Timberland:																											
SE SE Sec-28 Twn-4 Rng-13																											
Frl. NW NW Sec-34 Twn-4 Rng-13																											
Frl. SW NW Sec-34 Twn-4 Rng-13																											
NW SW Sec-34 Twn-4 Rng-13																											
Pt. SW SW S of RR Sec-34 Twn-4 Rng-13																											
N 1/2 NE NE Ex 2 A Sec-8 Twn-5 Rng-13																											
W 2/3 NE NE Ex .51 ac Sec-9 Twn5 Rng13																	NO INCOME										
(215 acres total)					X																						
Pastureland:																											
NE NE Sec-1 Twn-5 Rng-13																											
E 1/2 E 1/2 SE NE N of Rd Sec-1 Twn-5																											
Rng-13 (50 acres total)			X									X								X							
LEASE/RENTAL OF MINERAL RIGHTS		X										X							X								

Reporting Individual's Name
Ray Thornton

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Airplane		XX		4/13/92		XX					
	Municipal Bonds	XX			6/18/92		XX					
	House, The Bluffs, Baxter County, AR		XX		3/16/92		XX					
	Condominium, Fairfield Bay, Van Buren County, AR	XX			3/16/92		XX					

Reporting Individual's Name
Ray Thornton

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Troy & Nichola, Dallas, TX	Mortgage on house, 301 N. Main, Sheridan, AR		XX					
	First State Bank of Beebe, AR	Personal loan collateralized for house, 1712 Georgia, Little Rock		XX					
	Worthen Mortgage, Little Rock, AR	Mortgage on house, 1712 Georgia, Little Rock (to pay FSB Beebe loan)		XX					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Ray Thornton

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed. Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	National Research Council	1/16-17/92	Washington, DC to Irvine, CA to Washington, DC	Y	Y	NONE	NONE
	Executive Council on Foreign Diplomacy	3/6-8/92	Washington, DC to Princeton, NJ to Washington, DC	Y	Y	NONE	NONE

This page may be copied if more space is required.

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RAY THORNTON
2D DISTRICT, ARKANSAS
COMMITTEE ON
APPROPRIATIONS
SUBCOMMITTEES
AGRICULTURE, RURAL DEVELOPMENT
AND RELATED AGENCIES
VETERANS AFFAIRS, HOUSING AND
URBAN DEVELOPMENT AND
INDEPENDENT AGENCIES

Congress of the United States
House of Representatives
Washington, DC 20515-0402

WASHINGTON OFFICE
1214 LONGWORTH HOB
WASHINGTON DC 20515-0402
(202) 225-2506
DISTRICT OFFICE
1527 FEDERAL BUILDING
700 WEST CAPITOL AVE
LITTLE ROCK, AR 72201-3270
(501) 324-5941

May 25, 1993

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✓
MC

INSIDE MAIL

OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

1993 MAY 26 PM 3 02

OFFICE OF RECORDS & REGISTRATION

Mr. Donnald K. Anderson
Clerk of the House
U.S. House of Representatives
Office of Records and Registration
1036 Longworth House Office Building
Washington, DC 20515

Dear Mr. Anderson:

It has come to my attention that a June 18, 1992, purchase of municipal bonds, which was outlined in Schedule IV - Transactions (page 4) of my Ethics in Government Act Financial Disclosure Statement for Calendar Year 1992, was inadvertently not listed on Schedule III (pages 2 and 3) as an asset.

Please amend my Ethics in Government Act Financial Disclosure Statement for Calendar Year 1992, Schedule III (page 3), which outlines Assets and "Unearned" Income, to reflect the following additional asset: municipal bonds (Block A), valued between $15,001 and $50,000 (Block B), which produced interest income during calendar year 1992 in the range of $201 to $1,000 (Block C) and constituted a transaction (Block D).

Thank you for your assistance with this matter. If you have any questions or need additional information, please let me know.

Sincerely,

Ray Thornton

Ray Thornton

RT:lg

Enclosures

THIS STATIONERY PRINTED ON PAPER MADE OF RECYCLED FIBERS

4082

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

RECORDS & REGISTRATION
1993 MAY 26 PM 3:02
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

INSIDE MAIL

(Office Use Only)

Ray Thornton
(Full Name)

1214 Longworth H.O.B.
(Mailing Address)

202-225-2506
Daytime Telephone

Washington, DC 20515

Filer Status	[XX] Member of the U.S. House of Representatives	State: Arkansas District: Second	[ ] Officer or Employee	Employing Office
Report Type	[ ] Annual (May 15)	[XX] Amendment SCHEDULE III ONLY	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [XX]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [XX]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [XX]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [XX] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [XX]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [XX]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [XX]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [XX]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [XX]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [XX]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ray Thornton	May 25, 1993

Reporting Individual's Name
Ray Thornton

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples																												
S	ABC Corporation Stock			X								X									X								X
	Georga Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dovar, Delaware					X							X									X							
	RESIDENTIAL AND RENTAL PROPERTY: House, 301 N. Main, Sheridan, AR				XX								XX									XX							
	Duplex, 305 N. Main, Sheridan, AR				XX								XX									XX							
	House, The Bluffs, Baxter County, AR	XX													XX										XX				XX
	Condominium, Fairfield Bay, Van Buren County, AR				XX													NO INCOME	X										XX
	House, 1712 Georgia, Little Rock, AR				XX													NO INCOME	X										
	TIAA-CREFF						XX											PENSION							XX				

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ray Thornton

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																			BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependant child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)													Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000		
CHECKING ACCOUNTS, WORTHEN NATIONAL BANK, LITTLE ROCK, AR			X										X							X									
UNIMPROVED LAND, GRANT COUNTY, AR: Timberland:																													
SE SE Sec-8 Twn-4 Rng-13 Frl. NW NW Sec-34 Twn-4 Rng-13																													
Frl. SW NW Sec-34 Twn-4 Rng-13 NW SW Sec-34 Twn-4 Rng-13																													
Pt. SW SW S of RR Sec-34 Twn-4 Rng-13 N 1/2 NE NE Ex 2 A Sec-8 Twn-5 Rng-13																													
W 2/3 NE NE Ex .51 ac Sec-9 Twn5 Rng13 (215 acres total)						X											NO INCOME	X											
Pastureland: NE NE Sec-1 Twn-5 Rng-13																													
E 1/2 E 1/2 SE NE N of Rd Sec-1 Twn-5 Rng-13 (50 acres total)			X								X									X									
LEASE/RENTAL OF MINERAL RIGHTS		X									X								X										
MUNICIPAL BONDS				X									X							X									X

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 17 AM 9:46
U.S. HOUSE

HAND DELIVERED
mc
(Office Use Only)

Karen Lee Thurman
(Full Name)

130 Cannon House Office Building
(Mailing Address)

202-225-1002
Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: FLORIDA District: 6	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Karen L. Thurman	5-17-93

Reporting Individual's Name
Karen Lee Thurman

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of Florida	Legislative Salary	$19,175
	State of Florida	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Karen Lee Thurman

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX Over $100,000	Transaction (X)
S, DC, JT	Examples	S	ABC Corporation Stock			X								X									X							X
			George Wash. Credit Union Accounts				X									X									X					
			182 Main Street, Dover, Delaware					X							X									X						
	IRA: Midstate Federal					X										NA								NA						
S	IRA: Midstate Federal					X										NA								NA						
S	Deferred Compensation State of Florida Aetna Fins.						X														X									
S	Sun Bank: Dunnellon, FL				X																X									
	Dunnellon Savings Bank				X																X									

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Karen Lee Thurman

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
DC	Florida Pre-paid College fund (2 accounts)			X															X										

Schedule III—Continuation

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Reporting Individual's Name
Karen Lee Thurman

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Barnett Bank. Inverness, Florida	1/3 guarantor on loan		X					
S	Barnett Bank. Inverness, Florida	1/3 guarantor on loan		X					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NA		

Use additional sheets if more space is required.

Reporting Individual's Name
Karen Lee Thurman

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
1982	Marion County Florida School	
	Board	leave of absence during period
		of government service

GPO 1982 86-633A (pb)

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

Torkildsen, Peter G.
(Full Name)

12 Spruce St. Danvers MA 01923 508-741-1600
(Mailing Address) Daytime Telephone 202-225-8020

(4)

MAY 17 1993
(Office Use Only)

Filer Status	✓ Member of the U.S. House of Representatives — State MA District 6th	☐ Officer or Employee	Employing Office:
Report Type	✓ Annual (May 15)	☐ Amendment	☐ Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes ✓	No ☐	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes ☐ No ✓
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes ☐	No ✓	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes ☐ No ✓
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes ✓	No ☐	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes ☐ No ✓
Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes ☐	No ✓	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes ☐ No ✓
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes ✓	No ☐	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes ☐	No ✓
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes ☐	No ✓

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Peter G. Torkildsen

DATE (Month, Day, Year): May 17, 1993

4091

Reporting Individual's Name
Peter G. Torkildsen

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Comm. of Mass., Dept. of Labor and Industries	Commissioner Salary thru April	$20,790.-

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Peter G. Torkildsen

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X									X
	George Wash. Credit Union Accounts					X								X										X						
	182 Main Street, Dover, Delaware						X						X										X							
	U.S. Savings Bonds		X																	X										X
	IRA, Fleet Bank, certificate of deposit			X														NA												
	Janners Savings Bank, checking acct (Taxpayer)		X																	X										

For additional assets and unearned income, use next page

Reporting Individual's Name
Peter G. Torkildsen

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St Dover, Del.				X			
	Danvers Savings Bank, Danvers MA	Personal loan	X						
	Warren Five Cent Savings Bank, Peabody MA	Mortgage on 12 Spruce St, Danvers				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
- NONE -		

Use additional sheets if more space is required.

Schedules V and VI

4094

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(8)

RECEIVED
1993 MAY 17 AM 11: 17
CLERK
U.S. HOUSE OF REPRESENTATIVES

Esteban E. Torres
(Full Name)

1740 Longworth
(Mailing Address)

Washington, D.C. 20515

Daytime Telephone: 225-5256

Filer Status	[X] Member of the U.S. House of Representatives	State CA District 34th	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date

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(Office Use Only)

4095

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report, may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Esteban E. Torres

DATE (Month, Day, Year) May 17, 1993

Reporting Individual's Name

Esteban E. Torres

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Amusement & Music Operators Assn.	Contest	Sept. 9, 1992	$100.00
Mexican American Grocers Assn.	Speech	Feb. 21, 1992	$2,000.00
American Postal Workers Union	Speech	Oct. 24, 1992	$2,000.00

This page may be copied if more space is required.

Reporting Individual's Name
Esteban E. Torres

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset									BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)								Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	
B, DC, JT	Examples.	S	ABC Corporation Stock		X							X								X								X
			George Wash. Credit Union Accounts			X								X									X					
			182 Main Street, Dover, Delaware				X						X									X						
JT	Wright Patman Credit Union Accounts					X								X								X						

For additional assets and unearned income, use next page

Reporting Individual's Name
Esteban E. Torres

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
JT	Jackson County Federal Bank	Mortgage on 908 E. Lucille West Covina, CA				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Planer (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

4098

Reporting Individual's Name
Esteban E. Torres

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be seperately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
See Attached							

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FINANCIAL DISCLOSURE 1992

REIMBURSEMENTS

January 16-17, 1992
Associated Credit Bureaus, Inc. - speech - provided roundtrip air fare Ontario, CA to Phoenix, AZ, meals & lodging.

February 27-29, 1992
Mexican American Grocers Assn., panel discussion - provided roundtrip air fare, Washington-Los Angeles, meals & lodging for self & spouse.

April 22-23, 1992
Service Employees International Union - speech - provided roundtrip air fare, Washington-Los Angeles for spouse, air fare Los Angeles to Washington for me, meals & lodging for self & spouse

August 2 - 3, 1992
American Postal Workers Union, AFL-CIO - speech - provided roundtrip air fare, Washington-Los Angeles for self & spouse - meals & lodging for self & spouse.

September 11, 1992
ITT Technical Institute - graduation speech - provided roundtrip air fare, Washington-Los Angeles, for self & spouse

November 20 - 21, 1992
SER Jobs for Progress & El Concilio De Fresno - speech - provided roundtrip air fare Los Angeles-Fresno for self & spouse - lodging for self & spouse

Reporting Individual's Name
Esteban E. Torres

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
See Attached	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 88-638A (pu)

FINANCIAL DISCLOSURE STATEMENT FOR 1992

Hon. Esteban E. Torres
1740 Longworth HOB
Washington, D.C. 20515

34th District, California

POSITIONS

Trustee	Pan-American Development Foundation
Trustee	US Committee - UN Children's Emergency Fund (UNICEF)
Advisor	National Democratic Institute for International Affairs
Director	National Association of Latino Elected & Appointed Officials (NALEO)
Vice-Chair	Congressional Hispanic Caucus Institute, Inc.
Director	California State Society
Co-Chair	National Hispanic Democrats, Inc.
Member	UNA-USA Panel on UNESCO
Chairman	Japan-Hispanic Institute
Director	Coalition for Democratic Values
Founder	Center for National Independence in Politics
Director	One to One
Advisor	Big Brothers of Greater Los Angeles

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 14 PM 10:31

Robert G. Torricelli
(Full Name)

2159 Rayburn House Office Building — 202/225-5061
(Mailing Address) — Daytime Telephone

Washington, DC 20515

MC (7)

HAND DELIVERED

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives — State: NJ District: 09	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year) 5/13/93

4103

Reporting Individual's Name
Robert G. Torricelli

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	The Connell Company	Speech	May 5, 1992	$2,000
	Jempac	Speech	June 4, 1992	$1,000

This page may be copied if more space is required.

Reporting Individual's Name

Robert G. Torricelli

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column The column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	
S, DC, JT	S ABC Corporation Stock			X								X									X									X
Examples:	George Wash. Credit Union Accounts				X									X									X							
	182 Main Street, Dover, Delaware					X							X									X								
	Smith-Barney Government Securities (IRA)					X								X								X								
	Putnam Convertible Income Growth Fund (IRA)					X								X								X								
	Jersey Bank for Savings- Stock				X							X							X											
	First Savings Bank of Edison New Jersey - Stock					X						X											X							X

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name: Robert G. Torricelli

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	First Savings Bank of Edison, NJ - Stock	X			July 10, 1992				X			

Page 4 of 7

Schedule IV

4106

Reporting Individual's Name

Robert G. Torricelli

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Brown, Harriman & Company	Business Loan				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

Reporting Individual's Name

Robert G. Torricelli

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Speech to audience Cuban American Nat'l Foundation	01/28-01/29/92	Wash., DC -Miami -Wash., DC	Y	Y	None	N
	Speech to audience The Forum Club	03/06-03/08/92	Wash, DC -West Palm Beach, FL -Wash, DC	Y	Y	None	N
	Speech to audience Cuban American Nat'l Foundation	05/02-05/03/92	Newark, NJ -Orlando, FL -Newark, NJ	Y	Y	None	N
	Interview with magazine Italy-Italy Magazine	05/21-05/24/92	New York, NY-Milan, Italy-Rome, Italy-New York	Y	Y	None	N
	Speech to audience Caribbean Latin American Action	11/30-12/02/92	Newark, NJ-Miami,FL-Newark, NJ	Y	Y	None	N

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Reporting Individual's Name
Robert G. Torricelli

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Directors	Hackensack Hospital

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
N/A		

GPO 1982 80-838A (#4)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

Edolphus Towns
(Full Name)

286 Highland Boulevard
(Mailing Address)

Brooklyn, New York 11207

Daytime Telephone: (202)225-5936

Filer Status	[X] Member of the U.S. House of Representatives — State: NY District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

MAY 17

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HAND DELIVERED
(Office Use Only)

(9)

4110

PRELIMINARY INFORMATION -- ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependant child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION -- ANSWER EACH OF THESE QUESTIONS

TRUSTS -- Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION -- Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION -- THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 17, 1993

Reporting Individual's Name
TOWNS, E.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	New York City Board of Education	Spouse salary	N/A
	New York City Board of Education	Spouse pension	N/A

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Towns, E.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
The Connell Co., Westfield, NJ	Speech	March 6, 1992	2000
National Assn. Black Telecomm. Prof./S.W. Bell	Speech	May 2,1992	1500
The Connel Co., Westfield, NJ	Speech	Dec. 4, 1992	2000

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Reporting Individual's Name
Towns, E.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock				X								X									X									X
George Wash. Credit Union Accounts					X									X									X							
182 Main Street, Dover, Delaware						X							X									X								
Congressional Fed. Credit Union			X									X								X										
Republic National Bank of N.Y.			X											X						X										
East New York Savings Bank			X											X						X										
National Westminister Bank			X											X							X									
Prudential Insurance			X									X								X										
203-08 104th St., Hollis, NY							X						X											X						

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Towns, E.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	Route 1, Box 262,Chadbourne,NC			X									X									X							

Page 5 of 9

Schedule III – Continuation

4114

Reporting Individual's Name

Towns, E.

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

NONE

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example ABC Corporation Common Stock	X			10-12-92			X				

Page 9 of 9

Schedule IV

4115

Reporting Individual's Name: Towns, E.

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
S	Teacher's Retirement System	Loan	X						
	Source One Mortgage Co.	Mortgage on 203-08 104th St., Hollis, NY				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

NONE

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Towns, E.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Elizabeth City College	2/12-2/13	Wash.,DC-Raleigh,NC-Wash.,DC	y	y	None	No
	Cong. Black Caucus Found.	11/10-11/12	Wash., DC-Atlanta, GA.-Wash.,DC	y	y	None	No

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Reporting Individual's Name
Towns, E

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Trustee	Shaw University, Raleigh, NC

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26

NONE

Date	Parties To	Terms of Agreement

GPO 1983 88-638A (PA)

4118

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

93 MAY 18 AM 9 36
OFFICE OF CLERK
U.S. HOUSE OF REPRESENTATIVES

MAY 14 1993
(6)
(Office Use Only)

James A. Traficant, Jr.
(Full Name)

429 N. Main St.
(Mailing Address)

Poland, OH 44514

Daytime Telephone: (216)788-2414

Filer Status	[X] Member of the U.S. House of Representatives — State: Ohio District: 17	[ ] Officer or Employee — Employing Office:	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	**DATE (Month, Day, Year)** 5/14/93

Reporting Individual's Name
James A. Traficant, Jr.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Le Image Styling Salon	Spouse Salary	na

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4120

Reporting Individual's Name

James A. Traficant, Jr.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X								X								X									X
			George Wash. Credit Union Accounts				X									X								X							
			182 Main Street, Dover, Delaware					X							X								X								
	Aceto Corporation Stock				X									X								X									
	Congressional Federal Credit Union				X											X						X									
	lot #242 Matthews Rd., Boardman Ohio 44512						X							N	ON	E					X										

For additional assets and unearned income, use next page

Schedule III

4121

Reporting Individual's Name

James A. Traficant, Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Internal Revenue Service	Tax payment				x			
	Congressional Federal Credit Union	Personal Loan	x						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calender year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
James A. Traficant, Jr.

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

Source		Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
National Federation of Housing Counselors		June 15-16	Pitts-New Orleans-Pitts	Y	Y	None	N
CBS News		Aug 13	Yo-Cincinnati-Yo	N	Y	None	N
Phil Donahue Show		Oct 14-15	Pitts-NYC-Newark-Pitts	Y	Y	None	N
Association of Steel Distributors		Oct 18019	Pitts-Orlando-Pitts	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
James A. Traficant, Jr.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Northeast Ohio Energy Research & Redevelopment, Inc.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement

GPO 1982 66-635A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
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Walter Rayford Tucker, III
(Full Name)

419 Cannon HOB
(Mailing Address)

202- 225-7924
Daytime Telephone

Washington, D.C. 20515

Filer Status	[ ] Member of the U.S. House of Representatives [XX]	State: CA District: 37th	[ ] Officer or Employee — Employing Office: U.S. Congress
Report Type	[XX] Annual (May 16)	[ ] Amendment	[ ] Termination — Termination Date:

INSIDE MAIL

MC
(Office Use Only)

4125

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [XX] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). This Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Walter Tucker III

DATE (Month, Day, Year): 5-13-93

Reporting Individual's Name
Walter R. Tucker, III

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Brookings Institute	speech		$400

This page may be copied if more space is required.

Reporting Individual's Name

Walter R. Tucker, III

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

	BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)								Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples	B ABC Corporation Stock			X								X							X
		George Wash. Credit Union Accounts				X									X					
		182 Main Street, Dover, Delaware					X							X						

	BLOCK C Income: Category of Amount of Income (X)									
	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
ABC Corporation Stock			X							
George Wash. Credit Union Accounts					X					
182 Main Street, Dover, Delaware				X						

For additional assets and unearned income, use next page

Page ____ of ____

Schedule III

Reporting Individual's Name
Walter R. Tucker, III

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Federal Credit Union	Loan	X						
S	SBA	Small Business Loan		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

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U.S. HOUSE OF REPRESENTATIVES

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INSIDE MAIL

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(Office Use Only)

Walter Rayford Tucker, III
(Full Name)

419 Cannon HOB — 202-22507924
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[ ] Member of the U.S. House of Representatives — State: ____ District: ____	[ ] Officer or Employee	Employing Office: ____
Report Type	[xx] Annual (May 15)	[xx] Amendment	[ ] Termination — Termination Date: ____

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [xx]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [xx]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [xx]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [xx]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [xx]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [xx]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [xx]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [xx]

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SIGNATURE OF REPORTING INDIVIDUAL — Walter Tucker III — DATE (Month, Day, Year)

4129

Reporting Individual's Name
Walter R. Tucker, III

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Brookings Institute	speech	March 29, 1993	$400

This page may be copied if more space is required.

Page ____ of ____

Schedule II

Reporting Individual's Name
Walter R. Tucker, III

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Federal Credit Union	Loan	X						
S	SBA Loan	unpaid bills, equipmnet and loses due to L.A. riot		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

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Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

UNITI ⁀ STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17

Robert Anacletus Underwood
(Full Name)

(Mailing Address) Daytime Telephone

Filer Status	[X] Member of the U.S. House of Representatives — State: Guam, District: At Large	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

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HAND DELIVERED
(Office Use Only)

4132

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	X	
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**		X
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	X	
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**		X
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**		X
Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**		X
Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**		X
Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	X	
Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**		X

Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

	Yes	No
TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)		X
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)		X

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert A Underwood

DATE (Month, Day, Year): 5/17/93

Reporting Individual's Name

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U S Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Government of Guam Retirement Fund	Retirement Pay	$57,695
	University of Guam	Salary	33,176
	Government of Guam	Spouse Salary	29,765
	Government of Guam	Honorarium	1,250
	Government of Guam	Honorarium	1,570

For payments to charity in lieu of honoraria, use Schedule II

Page ___ of ___

Schedule I

Reporting Individual's Name

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock			X								X									X									X
			George Wash. Credit Union Accounts				X									X									X							
			182 Main Street, Dover, Delaware					X							X									X								
	Government of Guam Credit Union					X										X							X									
	Oppenheimer Funds (403B) (Retirement Plan)						X													N/A												

For additional assets and unearned income, use next page

Page ____ of ____

Schedule III

4134

Reporting Individual's Name

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Member	Guam Humanities Council
Member	Chamorro Language Commission

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1988 20-338A (pb)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 AM 11:53
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Jolene Unsoeld
(Full Name)

1527 Longworth
(Mailing Address)

Washington, DC 20515

Daytime Telephone: (202) 225-3536

(5)

HAND DELIVERED

MC

(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: WA District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calender year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Jolene Unsoeld

DATE (Month, Day, Year) May 13, 1993

4136

Reporting Individual's Name
Jolene Unsoeld

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) — None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Block D Transaction (X)
S	Examples: ABC Corporation Stock			X								X									X								X
DC	George Wash. Credit Union Accounts				X									X									X						
JT	182 Main Street, Dover, Delaware						X						X									X							
	Wash. State Employees Credit Union PO Box WSEC U; Olympia, WA 98507			X										X						X									
	TIAA/CREF 730 Third Ave.; N.Y. 10017					X								X								X							
	Signet Bank PO Box 25339; Richmond VA 23260			X										X						X									
	Exxon PO Box 3981, Church St NY 10008						X					X											X						
	Pension (Death Benefit - St of WA) Olympia, WA 98504										monthly payment							pension						X					
	86% undivided interest in family property on Evergreen Hwy; Vancouver, WA							X										none											

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Jolene Unsoeld

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Use of lecture tapes from Will Unsoeld for theater production											percentage of play-rights not						royalty		X										
(does not include pass-through to children of W Unsoeld)																													

Schedule III – Continuation

Reporting Individual's Name
Jolene Unsoeld

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Heritage Federal Bank Olympia, WA 98501	mortgage on personal residence 6110 Buckthorn NW, Olympia WA	X						
	Security Pacific Bank Olympia, WA 98501	personal loan for campaign	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Jolene Unsoeld

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Earth Communications Office (ECO) (Environmental Panel)	June 27-29	D.C. to Los Angeles to DC	N	N	—	—
	Center for Marine Conservation (Review proposed marine sanctuary)	Aug. 27	Seattle - Seattle	N	Y	—	—

This page may be copied if more space is required.

Schedule VII

4140

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 20 PM 11:16

INSIDE MAIL

MC 11
(Office Use Only)

Frederick Stephen Upton
(Full Name)

P. O. Box 900; 285 Ridgeway
(Mailing Address)

St. Joseph, MI 49085

Daytime Telephone: 202-225-3761

Filer Status	[X] Member of the U.S. House of Representatives	State: Michigan District: 6th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL [signature] **DATE (Month, Day, Year)** 5-17-93

4141

Reporting Individual's Name

Capt. N

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
Casualty & Property Group of Washington	Speech	March 17, 1992	$500

This page may be copied if more space is required.

Schedule II

4142

Reporting Individual's Name

Upton

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X					
			182 Main Street, Dover, Delaware					X						X									X						
JT	Whirlpool Stock (including Trusts listed below)										X		X													X			
	— Stephen E. Upton Trust																												
DC	— Mary Upton Trust																												
	— U.S. Gov. Securities				X										X						X								
DC	— Stephen T.M. Upton Trust																												

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton

S, DC, JT	BLOCK A Asset and/or Income Source: You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	BLOCK D Transaction (X)
	"First of Michigan" holdings reported																												
	at the following: Totals =								X			X		X										X					
	— Money Market			X																									
	— Chemical Banking			X																									
	— Donnelly Corp			X																									
	— Perrigo			X																									
	— Southern Comp			X																									
JT	— AT&T (includes sep holdings)				X																								
JT	— Ameritech (includes sep holdings)			X																									
S	— GM-H stock			X																									
S	— Upjohn			X																									
S	— Wisconsin Energy			X																									
	— AMP				X																								
	— Amoco				X																								
	— Berkshire Hathaway			X																									

Schedule III—Continuation

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 – $15,000	D $15,001 – $50,000	E $50,001 – $100,000	F $100,001 – $250,000	G $250,001 – $500,000	H $500,001 – $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		I None	II Less than $201	III $201 – $1,000	IV $1,001 – $2,500	V $2,501 – $5,000	VI $5,001 – $15,000	VII $15,001 – $50,000	VIII $50,001 – $100,000	IX $100,001 – $1,000,000	over $1,000,000	
	(First of Michigan holdings cont)																											
	– Disney					X																						
	– Englehard			X																								
	– Federal Natl Mortgage			X																								
	– Gannett				X																							
	– General Electric				X																							
	– Hasbro				X																							
	– Heubingen A & B			X																								
	– IBM			X																								
	– Mass Investors Trust (incl. sep. holdings)				X																							
	– Mass Inv. Growth (incl. sep. holdings)				X																							
	– Newell			X																								
	– Pac. Fisrp				X																							
	– Repsa					X																						
	– Pfizer				X																							
	– Procter & Gamble				X																							

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	First of Michigan holdings cont																													
	— Schlumberger			X																										
	— Sears			X																										
	— Shoreline Financial					X																								
	— USX-Marathon			X																										
	— USX-Steel			X																										
	— Wrigley					X																								
S	— American Cap. Conv. Sec.			X																										
S	— Stryker			X																										
	"Vial" Family Trusts composed																													
	of the following — Totals =								X			X												X					
	— AT&T			X																										
	— Ameritech			X																										
	— Bell Atlantic (includes separately)			X																										
	— Bell South (includes separately)			X																										

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset									BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	Over $1,000,000	Transaction (X)
	"Vial" Family Trusts																										
	– Exxon			X																							
	– Nynex			X																							
	– Pacific			X																							
	– Quaker Oats			X																							
	– S. W. Bell			X																							
	– U.S. West			X																							
	– Wrigley								X																		
	– Short term inv Fed/fund					X																					
	– American Express			X																							
	– Capital Holding			X																							
	– IBM			X																							
	– J.C. Penny			X																							
	– Pfizer				X																						
	– Taxable Bond Fund			X																							
	– 1986 Gov Bond Fund			X																							

Schedule III – Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Upton

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	"Viol Family Trust Con't																												
	— Amoco			X																									
	— Kimberly Clark			X																									
S	J.L. Governor			X															X										
JT	Cash Equivalent Fund Market			X								X									X								
	US-UPS Partnership			X														o.l revenue		X									
	Wolverine Exploration				X													o.l revenue					X						
	WGOR-FM Ltd Partnership			X															X										
	Seligman Fund				X							X									X								

Schedule III—Continuation

Reporting Individual's Name: Upton

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Perrigo Company	X			5-5-92	X						
	Donnely Corp.	X			5-12-92	X						
S	Stryker Corp	X			9-4-92	X						
	Perrigo Company	X			11-25-92	X						

Reporting Individual's Name: Upton

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be seperately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Tribune Broadcasting (speech)	Mar 13-16	Kalamazoo MI → Phoenix → Wash DC	Y	Y	None	N
	Michigan Realtors (speech)	Aug 14-15	Hot Springs, MI (Travel at own expense)	Y	Y	Spouse/2 kids	N
	Michigan Realtors (speech)	June 17-19	Grand Rapids MI (Travel at own expense)	Y-1 night	Y	None	N
	Natl Assoc of Broadcasters (speech)	June 15	Sun 1 → Palm Springs → LAX → Bud	Y	Y	Spouse/4 mo old son	Y - 4 days
	Comm Institute (non-broadcast media) (class instruct)	Dec 4-6	Williamsburg, VA (Travel at own expense)	Y	Y	Spouse/2 kids	N

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Reporting Individual's Name

Lipton

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
General Partner	Wolverine Oil (N Antrim well)
Lat. Partner	WGOR-FM
Co-Partner	US-UPS
	All un-compensated

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO 1982 50-636A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(9)

RECEIVED
OFFICE OF RECORDS & ...
1993 MAY 17 AM 11: 43
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Itimous Thaddeus Valentine, Jr.
(Full Name)

P.O. Box 727
(Mailing Address)

Daytime Telephone:

Nashville, N.C. 27856

Filer Status	[X] Member of the U.S. House of Representatives	State: N.C. District: 2nd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED

MC

(Office Use Only)

4152

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Itimous Thaddeus Valentine, Jr.

DATE (Month, Day, Year): May 14, 1993

Reporting Individual's Name
Itimous Thaddeus
Valentine, Jr.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Music teaching	Spouse music Services	N/A
	N.C. Legislative Retirement	Pension	338

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Tobacco Institute - Palm Springs, CA	speech	Jan. 15, 1992	2,000

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Schedule II

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
	Citizens Savings & Loan IRA-CD		X												N/A								N/A							X
	Citizens Savings & Loan stock			X																X										
	Unity Bank stock				X											X					X									X
	Unity Bank stock				X															X										
	Granville United Bank stock				X															X										
	Precious Metal Investment				X															X										

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Itimous Thaddeus Valentine, Jr.

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	(Sub S Corp) Vale Properties stock				X													Corp Sub S Income					X						
	Federal Land Bank stock			X															X										
S	Eastman Kodak stock			X								X									X								
S	Merrill Lynch New Econ Fund			X								X			X						X								
S	Merrill Lynch CBA Fund		X									X								X									
S	N.C. Municipal Power Bonds			X										X							X								
S	Merrill Lynch CIF 251 STMPS Fd	X												X								X							X
S	Merrill Lynch Flagship N.C. Fd			X								X									X								X
S	N.C. Eastern Power Bonds				X									X								X							X
	Roses Corporation stock			X															X										
	Vacant lot-Fort St, Nashville, N.C.			X															X										
	Nash County Farm, Nash County, N.C.					X							X								X								
	(219 W. Washington, Nashville) Drug store (1/2 int)	X											X		X					X				X					X
	Two vacant lots-Simayln St., Nashville, N.C.				X														X										
	State Employees Credit Union Savings			X										X							X								

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Itimous Thaddeus Valentine, Jr.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Citizens Savings & Loan savings		X											X						X								
Centura Bank checking		X											X						X								
Unity Bank checking	X												X						X								X
(no personal contribution made) N.C. Legislative Retirement		X															Pension		N/A						Pension		

Schedule III – Continuation

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Citizens Savings & Loan IRA-CD			X	01/01/92		X					
	Unity Bank stock (part of holding)		X		01/29/92	X						
	Unity Bank checking (account closed)			X	01/31/92	X						
S	Merrill Lynch CIP 251 STMPS FD		X		03/23/92		X					
S	Merrill Lynch Flagship N.C. FD (additional shares)	X			03/30/92	X						
S	N.C. Eastern Power Bonds (additional bonds)	X			03/30/92		X					
	Drug store (1/2 int) 219 W. Washington, Nashville		X		06/15/92		X					

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delewara	Mortgage on 182 Main St. Dover, Del.				X			
	Tar Heel Farm Credit, formerly Federal Land Bank, North Carolina	acres - Nash County, N.C. Mortgage on farmland 88.4		X					
	Don L. & Gerald A. Frazier (indiv)	acres - Nash County, N.C. Mortgage on farmland 88.4		X	(paid off in June)				

SCHEDULE VI—GIFTS N/A

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Itimous Thaddeus Valentine, Jr.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Tobacco Institute (speech)	Jan. 15-18	Raleigh, N.C. - Palm Springs, CA - Raleigh, N.C.	Y	Y	spouse	N

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 AM 9 52
U.S. HOUSE OF REPRESENTATIVES

MC (5)

HAND DELIVERED

(Office Use Only)

NYDIA M. VELAZQUEZ
(Full Name)

132 Cannon House Office Building
(Mailing Address)

(202) 225-2361
Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 12	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	5/13/93

Reporting Individual's Name
NYDIA M. VELAZQUEZ

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Commonwealth of Puerto Rico	Salary	92,473.03
	Univerisidad De Puerto Rico	Honoraria	425

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
NYDIA M. VELAZQUEZ

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S. Government retirement programs For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income You must, however, name the institution holding the IRA

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details on Schedule IV For more details, see instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																					Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)													Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X									X											X
			George Wash Credit Union Accounts			X								X										X									
			162 Main Street, Dover, Delaware				X						X										X										
	529 W. 42nd St, Apt. 7U, NY							X					X											X									

For additional assets and unearned income, use next page

Schedule III

Reporting Individual's Name

NYDIA M. VELAZQUEZ

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Home Savings Bank	Mortgage on 529 W 42nd St.				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
NYDIA M. VELAZQUEZ

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Directors	United Against AIDS

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 28.

Date	Parties To	Terms of Agreement

GPO 1992 90-836A (PN)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1993 MAY 13 AM 8 13
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

5

INSIDE MAIL

MC

(Office Use Only)

BRUCE F VENTO
(Full Name)

2304 RHOB
(Mailing Address)

202-225-6631
Daytime Telephone

WDC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: MN District: 4	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calender year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.) The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Bruce F Vento

DATE (Month, Day, Year) MAY 12, 1993

Reporting Individual's Name
BRUCE F. VENTO

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X									X								X
			George Wash. Credit Union Accounts			X									X									X						
			182 Main Street, Dover, Delaware				X							X									X							
JT	WRIGHT PATMAN C.U. RHOB WDC			X											X							X								
S	WRIGHT PATMAN C.U RHOB WDC			X											X						X									
S	AMERICAN SECURITY BANK W.D.C.				X										X							X								
S	KINNARD AND Co MPLS, MN			X											X							X								
S	RIGGS NAT'L BANK IRA			X											X						X									
S	RIGGS NAT'L BANK IRA			X											X						X									

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: BRUCE F. VENTO

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 – $1,000	III $1,001 – $2,500	IV $2,501 – $5,000	V $5,001 – $15,000	VI $15,001 – $50,000	VII $50,001 – $100,000	VIII $100,001 – $1,000,000	IX over $1,000,000	
SC JT	MINNESOTA ANNUITY ACCT				X						NA						NA											
SC JT	MPLS TEACHER RETIREMENT ASSOC			X							NA						NA											

Page 3 of 5

Schedule III – Continuation

4168

Reporting Individual's Name
BRUCE F VENTO

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	FEDERATED INVESTORS GROUP PITTSBURGH, PA	MARCH 12-15	W.D.C. – FORT MEYERS R.T.	Y	Y	SPOUSE	NONE
	NATIONAL BROADCASTING CORP.	MAY 30-31	~~STPAUL~~/MINN – NEW YORK NEW YORK – W.D.C.	Y	Y	NONE	NONE

This page may be copied if more space is required.

Reporting Individual's Name
BRUCE VENTO

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

- **EXCLUSIONS:** Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
SEPT 1976 PRESENT	BRUCE F. VENTO / MPLS SPECIAL SCHOOL DIST. #1	LEAVE OF ABSENCE WITHOUT COMPENSATION

GPO: 1992 59-635A (m)

4170

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17

(9)

HAND DELIVERED
(Office Use Only)

4171

(Full Name)	Honorable Peter J. Visclosky
(Mailing Address)	2464 Rayburn HOB Washington, D.C. 20515
Daytime Telephone	(202) 225-2461

Filer Status	[X] Member of the U.S. House of Representatives	State: IN District: 01	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependant child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL **DATE (Month, Day, Year)** 05/14/93

Reporting Individual's Name
VISCLOSKY

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
Anne Marie O'Keefe (spouse)			
	The Kamber Group	salary	NA
	Paid Prescriptions, Inc.	fees	NA
	Kaufman Public Relations	fees	NA
	American Cancer Society	fees	NA
	Western Consortium for Public Health	fees	NA
	Missouri ASSIST	fees	NA
	Leonard Sherp	fees	NA
	Washington Journalism Review	fees	NA
	Corporate Health Policy Group	fees	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

VISCLOSKY

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500

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Reporting Individual's Name
VISCLOSKY

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None."

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC JT	Examples.	S	ABC Corporation Stock			X								X									X									X
			George Wash. Credit Union Accounts				X									X									X							
			182 Main Street, Dover, Delaware					X							X									X								
JT	Merrill Lynch--cash management						X									X								X								
JT	Peoples Bank (checking)					X										X							X									
	Legg Mason Wood Walker (IRA)						X							X											X							
S	Wright-Patman Cong. Fed. C.U.					X										X							X									
S	Merrill Lynch (IRA)					X										X						X										
DC	John D. Visclosky Minority Trust					X										X							X									

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: VISCLOSKY

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																		BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	401K through the Kamber Group, managed by Alexander Financial Associates, Inc.		X									X		X	X						X								
DC	Peoples Bank--savings		X											X						X									
DC	Peoples Bank--savings		X											X						X									

Reporting Individual's Name

VISCLOSKY

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				

Reporting Individual's Name
VISCLOSKY

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out), loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delawere	Mortgage on 182 Main St. Dover, Del.				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

VISCLSOKY

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 8-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days

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Reporting Individual's Name
VISCLOSKY

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Trustee	Peter J. Visclosky Foundation, P.O. Box 10847, Merrillville, IN 46411

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1982 20-334A (pa)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

93 MAY 14 AM 8 17
U.S. HOUSE OF REPRESENTATIVES

Harold L. Volkmer
(Full Name)

2409 Rayburn HOB — 202/225-2956
(Mailing Address) — Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives — State Missouri, District 9	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination — Termination Date:

(8)

INSIDE MAIL

MC

(Office Use Only)

4180

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Harold L. Volkmer	May 13, 1993

Reporting Individual's Name

Harold L. Volkmer

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of Missouri - Missouri State Employee's Retirement System	Legislative Pension	$6468.00

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

Harold L. Volkmer

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	The Connell Company, Westfield, New Jersey	Speech & Discussion	3/16/92	$2000.00
	Phillip Morris Company, Washington, DC	Speech & Discussion	5/12/92	$2000.00
	National Agricultural Chemical Assn., Wash. DC	Speech & Discussion	9/15/92	$500.00

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Reporting Individual's Name
Harold L. Volkmer

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None"

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S ABC Corporation Stock			X								X									X							X
		George Wash. Credit Union Accounts				X									X									X					
		182 Main Street, Dover, Delaware					X							X									X						
JT	Farmers & Merchants Bank Hannibal, Missouri 63401					X									X							X							
JT	First American Bank of Virginia Arlington, VA 22205					X									X							X							
	Marion County Mutual Loan & Bldg. Assn., Hannibal, MO 63401				X										X							X							
S	Marion County Mutual Loan & Bldg. Assn., Hannibal, MO 63401				X										X						X								
JT	Wright Patman Congressional Fed. Credit Union, Washington, DC			X											X						X								

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Harold L. Volkmer

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	House & Lot at 1027 N. Manchester St. Arlington, VA 22205						X						X										X					
	Civil Service Retirement System					X																						

Schedule III – Continuation

Reporting Individual's Name: Harold L. Volkmer

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	House & Lot, 1027 N. Manchester St., Arlington, VA											
	John and Betsy A. Volkmer conveyed interest to				10-2-92							
	Harold L. & Shirley R. Volkmer											
	No payment [redacted] for interest.											

Schedule IV

Reporting Individual's Name
Harold L. Volkmer

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Continental Federal Savings Bank Fairfax, VA 2-030	Mortgage on 1027 N. Manchester St. Arlington, VA				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
Orrin Hatch Delta Airlines Utah Congressional Challange	Round trip free air travel and 3 day-2night stay Delta Airlines From Marriott Corp.	
Charity Golf Tournament Park City, Utah	Washington, DC to Jacksonville, FL for self & spouse (Prize received in random drawing-not subject to limitations)	Exact value unknown In excess of $250

Use additional sheets if more space is required.

Schedules V and VI

Reporting Individual's Name
Harold L. Volkmer

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Firearms Civil Rights Legal Defense Fund, Wash., DC	April 26-27	St. Louis, MO to Salt Lake City, Utah & return	Y	Y	None	None
	The Connell Company	March 16	Wash., DC - Westfield NJ and return	N	Y	None	None
	Danny Thompson Charity Golf Tournament Sun Valley, Idaho	August 20-23	St. Louis, MO to Sun Valley, ID to Salt Lake City	Y	Y	Spouse	None
	Delta Arilines Utah Congressional Challenge Charity Golf Tournament Park City, Utah	Auguet 23-26	Salt Lake City, Utah to St. Louis, MO	Y	Y	Spouse	None
	The Tobacco Institute Washington, DC	January 16-19	St. Louis,MO to Palm Springs, CA-Wash.,DC	Y	Y	Spouse	None
	Chinese National Association of Industry & Commerce Taipei, Taiwan Republic of China	January 8-12	Wash.,DC to Taipei, Taiwan to St. Louis,MO	Y	Y	Spouse	None

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 17 PM 3 14

Barbara F. Vucanovich
(Full Name)

2202 Rayburn House Office Building — 202-225-6155
(Mailing Address) — Daytime Telephone

Washington D.C. 20515

HAND DELIVERED

Filer Status	[X] Member of the U S House of Representatives	State: Nevada District: 2nd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

mc (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? If yes, Complete and Attach Schedule I.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i e , aggregating more than $250 and not otherwise exempt)? If yes, Complete and Attach Schedule VI.	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, Complete and Attach Schedule II.	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? If yes, Complete and Attach Schedule VII.	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? If yes, Complete and Attach Schedule III.	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, Complete and Attach Schedule VIII.	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? If yes, Complete and Attach Schedule IV.	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? If yes, Complete and Attach Schedule IX.	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? If yes, Complete and Attach Schedule V.	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U S C app 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U S C app. 6, § 104 and 18 U S C § 1001)

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Barbara F. Vucanovich	5/13/93

4188

Reporting Individual's Name
Barbara F. Vucanovich

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	U.S. House of Representatives (Mike Bilirakis, M.C.)	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Barbara F. Vucanovich

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
The Tobacco Institute	Speech	Feb. 28,1992	$2000.00

This page may be copied if more space is required.

Reporting Individual's Name
Barbara F. Vucanovich

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X							X
	Examples: George Wash. Credit Union Accounts				X									X					
	Examples: 182 Main Street, Dover, Delaware					X							X						
JT	2 lots 8/81 Unimproved Land/Winnemucca,NV			X															
JT	Fox & Carskadon Realty Partnerships		XX									X							
JT	Public Storage Partnerships			X								X							
JT	Intercapitol INS. Municipal Fund				X							X							X
JT	Nuveen Pref. Plus Municipal Fund			X								X							
JT	Allstate Municipal Income Trusts					X						X							

BLOCK C Income: Category of Amount of Income (X)									
	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000
S, DC, JT		X								
				X						
					X					
JT	X									
JT		X								
JT			X							
JT			X							
JT			X							
JT					X					

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
JT	Dean Witter Tax Exempt Securities				X							X										X							
JT	Sears Tax Exempt Investment Trust				X							X										X							
JT	Congressional Credit Union Accts.			X										X							X								
JT	Dean Witter AAA Accounts		X											X								X							
JT	Dean Witter ILA Accounts				X									X								X							
JT	US Gov't Series E&EE Bonds				X									X					X										
JT	Valley Bank of NV Money Market	X												X							X								X
JT	Home Federal Savings				X									X								X							
JT	Washoe County Airport Bonds	X												X								X							X
JT	Spokane Solid Waste Bonds			X										X								X							
JT	Orange Co. Development Bonds	X												X								X							X
JT	NV Housing Single Family Bonds			X										X							X								
JT	NV Gen. OBL Bonds			X										X							X								
JT	Elko Co. Motor Fuel Bonds			X										X							X								
JT	Clarke Co. Airport Bonds			X										X								X							

Last yr these were shown as 1 item/NV state bonds.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting individual's name: Barbara F. Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
JT	Chevron Corporation Bonds	X												X	X						X								X
JT	Carson City School Bonds			X									X								X								
JT	California Water Rev. Bonds			X										X							X								
JT	Bank of America Stock				X							X									X								X
JT	US West Stock			X								X									X								
JT	Southwestern Bell Stock				X							X									X								
JT	Scecorp Stock				X							X										X							
JT	Sante Fe Pacific Corp Stock			X								X								X									
JT	Sante Fe Energy Resources Stock			X								X							X										
JT	Pacific Telesis Stock			X								X									X								
JT	Pacific Gas & electric Stock				X							X									X								
JT	Nynex Stock				X							X									X								
JT	Kansas Power & light Stock					X						X											X						
JT	IBM Stock			X								X									X								
JT	Hidden Valley Stock			X								X										X							

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Barbara F. Vucanovich

Continuation Sheet (If needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	General Motors Stocks				X							X									X								
JT	General Electric Stock				X							X										X							
JT	Ford Motor Co. Stock				X							X										X							
JT	Catellus Development Stock			X															X										
JT	Bell South Stock				X							X										X							
JT	Bell Atlantic Stock				X							X									X								
JT	Ameritech Stock				X							X									X								
JT	AT&T stock				X							X										X							
JT	American Brands Stock					X						X											X						
S	IRA Bank of America Stock			X								X								X									
S	IRA Nevada Power Stock			X								X								X									
S	IRA SCEcorp Stock			X								X									X								
S	IRA Dean Witter ILA			X										X						X									
S	IRA Dean Witter Gov't Securities			X								X										X							
S	IRA Dean Witter Capital Growth Securities			X											X					X									X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Barbara Vucanovich

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	IRA Bank of America Stock			X								X									X								
	IRA SCECORP Stock			X								X									X								
	IRA Dean Witter ILA			X								X								X									
	IRA Dean Witter Div'd Grth fund			X								X			X						X								
	IRA Dean Witter US Gov't Securities fund			X								X									X								

Schedule III – Continuation

Reporting Individual's Name
Barbara Vucanovich

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

B, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,000 - Over
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	Intercapital Insured Municipal Fund	X			2/21/92		X					
JT	Valley Bank of Nevada Money Market (closed)		X		4/30/92	X						
JT	Washoe County Airport Bonds (called)		X		7/1/92 10/8/92	X						
JT	Orange County Development Bonds (matured & called)		X		5/1/92 11/1/92	X						
JT	Bank of Amer. Stock (was valley Bank of Nevada)			X	1st Quarter/92		X					
JT	Chevron Corporation Bonds (called)		X		7/1/92	X						
S	IRA Dean Witter Capitol Growth Securities	X			1/23/92	X						

Reporting Individual's Name: Barbara Vucanovich

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	None								

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Reporting Individual's Name

Barbara Vucanovich

SCHEDULE VII – FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act [5 U.S.C. § 7342]; travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

Source		Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
The Tobacco Institute		1/16-19/92	Buffalo, NY-Palm Springs CA - Reno, NV	Y	Y	Spouse	1 Day
			Spouse-Reno, NV - Palm Springs,CA Reno, NV				
National Resturant Assoc.		3/13-16/92	Washington D.C. - Monterey,CA-Wash. D.C.	Y	Y	Spouse	N
Electronics Ind. Association		1/9-12/92	Reno-Las Vegas-Reno	Y	Y	Spouse	N
Nevada Mining Assoc.		8/27-28/92	No Transportation ~~Provided~~	Y	Y	Spouse	N

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Reporting Individual's Name
Barbara Vucanovich

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
None	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO 1992 50-525A (pm)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 12 1...

(B)

HAND DELIVERED

MC

(Office Use Only)

4200

Robert S. Walker (Full Name)	
6065 Parkridge Drive (Mailing Address)	(717)569-3990 Daytime Telephone
East Petersburg, PA 17520	

Filer Status	[X] Member of the U.S. House of Representatives	State: PA District: 16th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 16)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	[X]	No	[ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes	[ ]	No	[X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	[X]	No	[ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	[X]	No	[ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	[ ]	No	[X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes	[ ]	No	[X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes	[ ]	No	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Robert S. Walker	**DATE (Month, Day, Year)** 5/12/93

Reporting Individual's Name
Robert S. Walker

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Lancaster City School District (PA)	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

4201

Reporting Individual's Name
Robert S. Walker

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period Exclude Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling, any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U S Government retirement programs For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used If an asset was sold and is included only because it generated income, the value should be "None"

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income You must, however, name the institution holding the IRA

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year If so, provide details on Schedule IV For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left (This is optional) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples	S ABC Corporation Stock			X								X								X									X
		George Wash Credit Union Accounts				X									X								X							
		182 Main Street, Dover, Delaware					X							X								X								
JT	General Motors Stock				X								X							X										
S	General Electric Stock				X								X							X										
S	Chevron Stock				X								X							X										
S	Exxon Stock				X								X							X										
S	Hershey Stock				X								X							X										
JT	Pennsylvania General Obligation Bonds				X																									

For additional assets and unearned income, use next page

Schedule III

4202

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Robert S. Walker

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Shearson Lehman Hutton FCC National Bank - DE				X									X								X						
S	Philadelphia Life Insurance IRA			X										X							X							
	Philadelphia Life Insurance IRA			X										X							X							
S	Bell Atlantic			X								X								X								
JT	Congressional Federal Credit Union Checking Account			X										X						X								
S	Commonwealth of Pennsylvania Public School Employees Retirement				X														X									

Reporting Individual's Name
Robert S. Walker

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
JT	FCC National Bank - DE	X			3-11-92		X					

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
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U.S. HOUSE

(6)

HAND DELIVERED
(Office Use Only)

JAMES T. WALSH
(Full Name)

400 BROADVIEW DRIVE
(Mailing Address)

SYRACUSE, NEW YORK 13215

Daytime Telephone: (202)2253701

Filer Status	[X] Member of the U.S. House of Representatives	State: New York District: 25th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person, upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: James T. Walsh

DATE (Month, Day, Year): May 12, 1993

4205

Reporting Individual's Name

JAMES T. WALSH

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Onondaga Community College	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4206

Reporting Individual's Name

JAMES T. WALSH

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	Less than $1,001	$1,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $250,000	$250,001 – $500,000	$500,001 – $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	Less than $201	$201 – $1,000	$1,001 – $2,500	$2,501 – $5,000	$5,001 – $15,000	$15,001 – $50,000	$50,001 – $100,000	$100,001 – $1,000,000	over $1,000,000	
B, DC, JT — Examples: B — ABC Corporation Stock			X									X									X								X
George Wash. Credit Union Accounts					X									X									X						
182 Main Street, Dover, Delaware						X							X									X							
Prudential-Bache IRA Rollover A/C's																													
Holding the Following Assets:																													
° American Capital Gov't Security																													
Fund					X							X										X							
° Affiliated Fund Incorporated		X										X			X						X								

For additional assets and unearned income, use next page

4207

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: JAMES T. WALSH

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	
	IRA Rollover A/C Holdings, Cont'd:																												
	° Templeton Funds Inc.-World Fd	X													X						X								
	° Prudential Inconvertible Plus Fund - Class B			X								X									X								
	° Prudential Equity Income Fund - Class B			X								X			X						X								
	° Ariel Growth Fund	X													X						X								
	° Prudential Moneymart Fund			X								X								X									
	° Merck and Company			X								X							X										
	° Wal Mart Stores Incorp.			X								X							X										

Schedule III – Continuation

4208

Reporting Individual's Name
JAMES T. WALSH

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Affiliated Fund Incorporated		X		12/2/92	X						
	Ariel Growth Fund		X		12/2/92	X						
	Templeton Funds Inc. World Fund		X		12/2/92	X						
	Merck and Company	X			12/2/92	X						
	Wal Mart Stores Incorporated	X			12/2/92	X						
	Prudential Moneymart Fund	X			12/3/92	X						

Reporting Individual's Name

JAMES T. WALSH

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Director	Erie Canal Museum
Director	Kidney Foundation of CNY Chapter
Trustee	Vera House

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
N/A	New York State and Local Retirement Systems	Pension Plan Interest Available at Retirement Age
N/A	NYNEX Retirement Plan	Pension Plan Interest Available at Retirement Age

GPO 1988 50-535A pbk

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17 4:19

(11)

CRAIG A. WASHINGTON
(Full Name)

2323 Caroline St. #1000
(Mailing Address)

Houston, Texas 77004

Daytime Telephone (713) 659-9090

Filer Status	[XX] Member of the U.S. House of Representatives	State Texas District 18th	[ ] Officer or Employee	Employing Office
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

HAND DELIVERED
(Office Use Only)

4211

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ] No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL

DATE (Month, Day, Year) May 17, 1993

Reporting Individual's Name

CRAIG A. WASHINGTON

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
NONE			

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4212

Reporting Individual's Name

CRAIG A. WASHINGTON

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	NONE			

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
CRAIG A. WASHINGTON

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

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In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S ABC Corporation Stock			X								X									X									X
		George Wash. Credit Union Accounts				X									X									X							
		182 Main Street, Dover, Delaware					X							X									X								
	Exxon			X															Royalty		X										
	Atlantic Richfield (Stock)			X									X								X										
	2323 Caroline (Lawyers Office) Houston, Texas													X											X						
	2323 Caroline (Price) Houston, Texas													X											X						
	2323 Caroline (Sprott) Houston, Texas													X											X						
	3443 Palm Street Houston, Texas						X							X							X										

For additional assets and unearned income, use next page.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG A. WASHINGTON

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
JT S DC	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
713 Carolyn #A Austin, Texas					X						X										X					
713 Carolyn #B Austin, Texas											X										X					
901 12th Street Hempstead, Texas				X							X								X							
3823 Botany Houston, Texas				X							X									X						
3101 Kirk (unimproved lot) Houston, Texas			X																							
2802 Blodgett (unimproved lot) Houston, Texas				X							X								X							
2816 Blodgett (unimproved lot) Houston, Texas				X																						
3243 Pine Street Dallas, Texas				X																						
Unimproved Lot Brazoria County, Texas		X																								
Unimproved Lot Hardin County, Texas		X																								
Undivided Interest in Rural Land Nacogdoches County, Texas		X																								
2323 Caroline (Office Bldg. & 2 Houston, Tx. parking lots)							X																			
Nations Bank Houston, Texas		X																								
U. S. Savings Bonds				X						FACE VALUE																
Washington Properties (NO ASSETS) 1/2 Ownership of Stock	X																									

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: CRAIG A. WASHINGTON

S, DC, JT	BLOCK A Asset and/or Income Source — You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	BLOCK B Valuation of Asset: Year End Value (X) — None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	BLOCK D Transaction (X)
	Mahogany Interests Houston, Texas (NO ASSETS)	X																											

Reporting Individual's Name
CRAIG A. WASHINGTON

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	5643 Elmsprings (Creditor: Regional Investment) Houston, Texas	FORE	CLOS	URE	4-92							
	1127 Moody (Creditor: Texas Banc Savings) Galveston, Texas	FORE	CLOS	URE	1-92							
	J. W. & Blanche Bankes (2 unimproved lots adjacent to 2323 Caroline)	FORE	CLOS	URE	3-92							

Reporting Individual's Name

CRAIG A. WASHINGTON

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	RTC (Successor to University Savings)	REAL PROPERTY MORTGAGE			X				
	SUNBELT NATIONAL MORTGAGE	" " "		X					
	S & B FINANCIAL (Successor to Tx. Trust Savings)	" " "		X					
	DR. A. H. BROOKS	" " "	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Reporting Individual's Name
CRAIG A. WASHINGTON

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
SEE ATTACHMENT P.10 OF 11							

This page may be copied if more space is required. Page 9 of 11 Sched. VII

ATTACHMENT TO FINANCIAL DISCLOSURE STATEMENT
FOR CALENDAR YEAR 1992
PART VII - FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

1.) Emory College of Law 9th Annual Banquet 03-27/03-29-1992
Roundtrip air travel from Washington, DC to Atlanta, GA
2 days of lodging, 2 days of food, self only

2.) FIMPES XXI General Convention 04-03/04-04-1992
Roundtrip aor travel from Washington, DC to Mexico City, MEX
1 day of lodging, 1 day of food, self only

3.) Danny Thompson Memorial 08-19/23-1992
Roundtrip air travel from Houston, Tx. to Sun Vally, ID
3 days of lodging, 3 days of food, self & spouse

4.) Robert F. Kennedy Memorial 10-16/17-1992
Roundtrip air travel from Washington, DC tp Hyannis, MA
1 day of lodging, 1 day of food, self & spouse

Reporting Individual's Name
CRAIG A. WASHINGTON

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Washington Properties
General Partner	Mahogany Interests

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
12/31/90	SIDNEY J. BRAQUET, MELVIN L. LAMPLEY AND CRAIG A. WASHINGTON	Continued payments towards liquidation of partnership interests, if, as and when available.

GPO 1992 86-838A (IN)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
OFFICE OF RECORDS & REGISTRATION
1993 JUN -8 PM 4: 37
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

(10)

MC HAND DELIVERED
(Office Use Only)

MAXINE WATERS
(Full Name)

600 WILSHIRE BLVD., STE.1500 — (213) 489-4792
(Mailing Address) — Daytime Telephone

LOS ANGELES, CA 90017

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 35	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [X]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (*See* 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Maxine Waters — **DATE (Month, Day, Year)** June 8, 1993

4222

Reporting Individual's Name

MAXINE WATERS

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Mercedes Benz of Hollywood	Spouse Salary	NA
	Mercedes Benz of Hollywood	Spouse--prizes/awards & Promotion	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
MAXINE WATERS

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Megazine	Article	Aug. 13, 1992	$500
San Francisco Lawyer's Committee	Speech	Jan.17,1992	$500.00
El Centro de la Raza	Speech	Aug.24,1992	$1,000.00
National Black MBA Assoc.Inc.	Speech	Oct.10,1992	$1,500.00
Afrikan/American Advancement Corp.	Speech	Oct.17,1992	$2,000.00

This page may be copied if more space is required.

Reporting Individual's Name
MAXINE WATERS

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples: S	ABC Corporation Stock			X								X									X								X
		George Wash. Credit Union Accounts				X									X									X						
		182 Main Street, Dover, Delaware					X							X									X							
	Family Savings Bank			X											X						X									
S	Founders National Bank of Los Ang.				X										X						X									
	Congressional Federal Credit Union					X									X							X								
S	New York Life Insurance Company				X										X							X								
S	Essence Communications					X							X									X								
S	Kemper CA Tax-Free Fund				X								X								X									

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MAXINE WATERS

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S	9615 5th Ave.,Inglewood,CA					X													X										
S	Tract Unit 3557,Lot 96,Kern Co.,CA				X														X										
S	417 Pearl St.,Compton,CA					X							X											X					
S	2201 Kirk St.,Houston,TX					X													X										
S	1520-22 Meadowbrook,Los Angeles,CA						X						X												X				
	3475 Mt.Vernon Dr.,Los Angeles,CA						X						X										X						
S	701 W. Barstow; Palm Springs,CA				X														X										
S	1044 W.82nd St.,Los Angeles,CA					X													X										
S	Dept.of Water and Power of City of LA: Meadowbrook Prop--Energy Efficency	X																Grant				X							
S	Mercedes Benz Credit Union 401K					X													X										

Reporting Individual's Name
MAXINE WATERS

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X) B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Family Savings Bank	Mortgage on 3475 Mt.Vernon Dr.,LA,CA		x					
S	Founders National Bank	Mortgage on 1520-1522 Meadowbrook,LA,CA				x			
S	Founders National Bank	Mortgage on 1044 W.82nd St.,LA,CA			x				
S	Metmor Financial Inc.	Mortgage on 417 Pearl St.,Compton,CA			x				
S	Broadway Federal Savings and Loan	Mortgage on 9615 5th Ave.,Inglewood,CA			x				
S	Founders National Bank	Credit Line		x					

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
Spike Lee, L.A. USA	Jacket	$375.00

Use additional sheets if more space is required.

4227

Reporting Individual's Name
MAXINE WATERS

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	San Francisco Lawyer's Committee	Jan.17,1992	Los Angeles-San Francisco	N	Y	None	N
	Martin Luther King,Jr.Social ~~Responsibility for Change~~	Jan.17-21,1992	San Francisco-Atlanta-Washington,D.C.	Y	Y	None	N
	Wellesley College	Feb.11,1992	Los Angeles-Boston-Los Angeles	Y	Y	None	N
	Black Elected Demo.Off.of Cleveland	Mar.13-14,1992	Washington,D.C.-Cleveland-Washington,D.C.	Y	Y	None	N
	National Black Methodists	Mar.20,1992	Washington,D.C.-Las Vegas-Washington,D.C.	Y	Y	None	N
	National Coal.of 100 Black Women	June 22,1992	Washington,D.C.-New York-Washington,D.C.	Y	Y	None	N
	Friends of Hazel Obey	Aug.28,1992	Los Angeles-Austin,TX-Los Angeles	Y	Y	None	N
	Amer.Fed.of State County & Mun.Empl.	Aug.19,1992	Los Angeles-New York-Los Angeles	Y	Y	None	N
	Washington State Labor Council	Aug.24,1992	Los Angeles-Seattle-Los Angeles	N	Y	None	N
	El Centro de la Raza	Aug.24,1992	Los Angeles-Seattle-Los Angeles	Y	N	None	N
	Operation PUSH	Sept.29,1992	Washington,D.C.-Chicago-Washington,D.C.	Y	Y	None	N
	Grigsby Brandord & Co.Inc.	Sept.3-4,1992	Los Angeles-San Francisco-Los Angeles	Y	Y	None	N
	Friends of Vera Katz	Oct.9,1992	Los Angeles-Portland	Y	Y	None	N
	National Black MBA Assoc.Inc.	Oct.10,1992	Portland-St.Louis-Los Angeles	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
MAXINE WATERS

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Afrikan/American Advancement Corp.	Oct.17,1992	Los Angeles-Chicago-St.Louis	Y	Y	None	N
	Coalition of Black Trade Unionists	Oct.18-19,1992	St.Louis-Msdison,Wisc.	Y	Y	None	N
	French American Foundation	Nov.28-Dec.1,1992	Los Angeles-Chicago-Paris-Washington,D.C.	Y	Y	None	N
	Univ.of CA Institute	Nov.6,1992	Los Angeles-San Diego-Los Angeles	Y	Y	None	N
	Univ.of North Carolina	Nov.12,1992	Los Angeles-Raleigh /Durham	Y	Y	None	N
	African National Congress Prep.Committee	Nov.13-15,1992	Raleigh/Durham-New York	Y	Y	None	N
	Comm.Workers of Amer.Dist.1	Nov.16-17,1992	New York	Y	Y	None	N
	Interfaith Center on Corporste Responsibility	Nov.18-19,1992	New York-Los Angeles	Y	Y	None	N
	Princeton University	Dec.10-11,1992	Washington,D.C.-Philadelphia-Los Angeles	Y	Y	None	N

This page may be copied if more space is required.

Reporting Individual's Name
MAXINE WATERS

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director	Essence Communications
Director	Warwick Foundation
President	Black Women's Forum
Director	Gourmet Services
Director	Transafrica Foundation
Director	Center for Policy Alternatives

(SEE NEXT PAGE)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 59-836A (m)

Reporting Individual's Name
MAXINE WATERS

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director	National Commission for Economic Conversion & Disarmament
Director	Minority AIDS Project
Director	Clara Elizabeth Jackson Carter Foundation, Spellman College
Director	Center for National Policy

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1992 50-835A (m)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

RECEIVED
MAY 20 AM 10 13

MELVIN L. WATT
(Full Name)

515 NORTH POPLAR STREET — 202-225-1510
(Mailing Address) — Daytime Telephone

CHARLOTTE, NORTH CAROLINA 28202

Filer Status	[X] Member of the U.S. House of Representatives — State NC, District 12th	[ ] Officer or Employee — Employing Office	
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MAY 17 1993
MC (11)
(Office Use Only)

4232

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Melvin L. Watt — DATE (Month, Day, Year): 5-17-1993

Reporting Individual's Name

MELVIN L. WATT

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Ferguson, Stein, Watt, Wallas, Adkins, et.al., P.A., Charlotte,NC	Salary	$ 277, 981
	Charlotte-Mecklenburg Board of Education, Charlotte, NC	Spouse's Salary	N/a

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name

MELVIN L. WATT

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are not self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
				A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X									X									X									X
			George Wash. Credit Union Accounts			X										X									X							
			182 Main Street, Dover, Delaware					X							X									X								
	Delaware Charter/Equitec - IRA				X												X				X											
	Delaware Charter/Hallwood - IRA				X												X				X											
	State Of NC Employee Def. Comp.				X											X						X										
	Hallwood Realty Partners				X												X				X											
S	Hallwood Realty Partners				X												X				X											
	Wheat First Securities, Inc.			X										X								X										

For additional assets and unearned income, use next page

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SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MELVIN L. WATT

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependant child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
S	Wheat First Securities, Inc.		X									X									X								
	American Capital Pace Fund	X													X						X								X
	Barclays PLC	X													X						X								X
	NationsBank, Charlotte, NC					X						X										X							
	General Motors Corp.			X								X									X								
	Bristol Myers			X								X									X								
	Circuit City Stores			X								X								X									
	Prudential Adjustable Rate Sec.			X								X									X								X
	Mechanics and Farmers Bank			X								X									X								
	Lansing Pacific			X								X								X									
S	Lansing Pacific			X								X								X									
DC	Barclays PLC			X								X								X									
DC	Circuit City Stores			X								X								X									
DC	NationsBank, Charlotte, NC			X								X								X									
	Skyland Broadcasting, Inc.	X																	X										

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MELVIN L. WATT

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H Over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX Over $1,000,000	BLOCK D Transaction (X)
	Westside Professional Associates, Ltd. - Office Building						X				X				X						X								
	Mid South Capital Group Real Estate Charlotte, NC				X						X				X				X										
	East Towne Manor, Inc. Rest Home, Charlotte, NC								X		X				X				X										
	Ferguson, Stein, Watt, Wallas Adkins, et.al., P. A.				X						X				X				X										
	Mel Watt For Congress Committee						X												X										
	Key West Communications Corp.	X																	X										
	Calvert Ariel - Ira		X									X			X						X								
S	Calvert Ariel - IRA		X									X			X						X								
S	Mentor Growth Trust - IRA			X								X									X								
	Mentor Growth Trust - IRA			X								X									X								
	Transamerica Life - IRA			X										X							X								

Schedule III—Continuation

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: MELVIN L. WATT

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	Advanced NMR Systems, Inc.	X													X				X										X
	CFS Financial Corp	X													X						X								X
	First Savings Bank, Greenville S. C.	X													X				X										X
	Genicom Corp.	X													X				X										X
	Southeastern Savings Bank, Inc. Charlotte, NC	X													X				X										X
	Phillip Morris Companies	X										X							X										X
	East Towne Manor, Inc. - Notes				X														X										
DC	Mechanics and Farmers Bank		X																										
S	N. C. State Employees Retirement System			X																									
	Ferguson, Stein, Watt, Wallas, et. al., P.A. Pension Trust					X																							
	Ferguson, Stein, et.al., P.A. 401K		X																										

Reporting Individual's Name

MELVIN L. WATT

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Prudential Adjustable Rate Securities	X			6-19-92		X					
	Prudential Adjustable Rate Securities		X		8-04-92	X						
	Phillip Morris Companies, Inc. - Stock		X		2-20-92	X						
	Advanced NMR Systems, Inc. - Stock		X		2-20-92	X						
	Barclays PLC - Stock		X		2-20-92	X						
	First Saving Bank, FSB - Stock Greenville, S. C.		X		2-20-92	X						
	American Capital Pace Fund, Inc. - Stock		X		2-20-92	X						
	CFS Financial Corp. - Stock		X		2-20-92	X						

Schedule IV

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Reporting Individual's Name

MELVIN L. WATT

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Mechanics and Farmers Bank, Durham, NC	Bank Loans to East Towne Manor			X				
	First Union Mortgage Corp., Charlotte, NC	Mortgage on East Towne Manor						X	
	NationsBank, Charlotte, NC	Mortgage on Westside P.A.Ltd			X				
	NationsBank, Charlotte, NC	Mortgage on Mid South Capital		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Planter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Reporting Individual's Name

MELVIN L. WATT

SCHEDULE VIII—POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Director	Central Piedmont Community College Foundation
Secretary-Treasurer-Dir	East Towne Manor, Inc.
Secretary-Treasurer-Dir	Ferguson, Stein, Watt, Wallas, Adkins, et. al., P. A.
Director	Cities In Schools, Charlotte, NC
Director	West Charlotte Business Incubator, Inc.
Partner	Mid South Capital Group

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1992 58-525A (m)

4240

Reporting Individual's Name
MELVIN L. WATT

SCHEDULE VIII—POSITIONS Continued

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule . For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Limited Partner	Westside Professional Associates, Ltd.
Director	Mecklenburg County Bar Foundation
Director	MDC, Inc., Chapel hill, NC (a Nonprofit Organization)
Member	Johnson C. Smith University Board of Visitors

SCHEDULE IX—AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
Dec. 31,'92	Ferguson, Stein Law Firm and Melvin L. Watt	To pay capital interest of terminating shareholder upon calculation of value of such interest during calendar year 1993.

OPC 1192 59-635A (m)

COMPUTATION OF VALUE FOR DISCLOSURE STATEMENT

MELVIN L. WATT

DECEMBER 31, 1992

	TOTAL VALUE	PERCENTAGE SHARE
WESTSIDE PROFESSIONAL ASSOCIATES, LTD.		
OWNERSHIP PERCENTAGE		2.4%
PROPERTY TAX APPRAISED VALUE	$ 5,918,311	$ 142,039
MORTGAGES	$ 2,202,749	52,865
MID SOUTH CAPITAL GROUP		
OWNERSHIP PERCENTAGE		6.7%
REAL ESTATE, AT ORIGINAL COST	$ 559,956	$ 37,517
MORTGAGES	$ 431,496	$ 28,910
EAST TOWNE MANOR, INC.		
OWNERSHIP PERCENTAGE		33.3%
PROPERTY TAX APPRAISED VALUE	$ 1,689,720	$ 557,608
MORTGAGES	2,364,033	$ 788,011
BANK LOANS	230,000	76,656
ADVANCES-OWNERS	294,998	98,332
	$ 2,889,031	$ 963,010
FERGUSON, STEIN, WATT, WALLAS, ADKINS, P.A.		
OWNERSHIP PERCENTAGE		15.0%
NET BOOK VALUE	$ 295,000	$ 44,250

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 PM 4:41

Henry Arnold Waxman
(Full Name)

2408 Rayburn Building — 202-225-3976
(Mailing Address) — Daytime Telephone

Washington, D. C. 20515

Filer Status	[ ] Member of the U.S. House of Representatives — State ____ District ____	[ ] Officer or Employee	Employing Office ____
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date ____

(8)

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(Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Henry A Waxman

DATE (Month, Day, Year) May 12, 1993

Reporting Individual's Name
Waxman

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Magazine	Article	Aug. 13, 1992	$500
California Neurological Surgeons	speech	1/26/92	$2000
Los Angeles Radiological Society	speech	1/31/92	$2000
College of American Pathologists	speech	3/20/92	$2000
R. Duffy Wall & Associates	speech	3/30/92	$2000
Coalition of High Volume Medical Assistance Hospitals	speech	5/11/92	$2000
National Health Lawyers Association	speech	6/12/92	$2000
National Restaurant Association	speech	9/14/92	$2000
American Society of Plastic & Reconstructive Surgeons	speech	9/23/92	$2000
American Information Systems	speech	9/23/92	$2000
Manor Healthcare Corporation	speech	11/6/92	$2000

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HAW Speeches for 1992

January 26	California Neurological Surgeons - $2000 charitable contribution to United Jewish Welfare Fund
January 31	LA Radiological Society $2000 charitable contribution to: $1000 Operation Exodus and $1000 Jewish Home for the Aged
March 20	College of American Pathologists - $2000 contribution to United Jewish Welfare Fund
March 30	R Duffy Wall & Associates -$2000 charitable contribution to: $1000 Jewish Family Services -LA & $1000 AIDS Project LA
May 11	Coalition of High Volume Medical Assistance Hospitals - "Roundtable" on Medicaid & health care reform $2000 charitable contribution to Adas Israel Congregation
June 12	National Health Lawyers Association $2000 Charitable contribution to:$1000 Senior Adult Day Care Center, LA, $500 Alternative Living for the Aging, $500 Mazon
September 14	National Restaurant Association $2000 charitable contribution to: $500 Camp Ramah, $500 Congregation Beth El, $500 Amnesty International,$500 Gay and Lesbian Community Services,
September 23	American Society of Plastic and Reconstructive Surgeon, Inc. $2000 to charity: $1000 Multiple Sclerosis Society, $250 Jewish Social Services Agency, $250 San Fernando Valley Child Guidance Clinic, $500 Vista del Mar
September 25	American Information Systems - $2000 charitable contribution to $1000 United Jewish Federation of Greater Washington $500 Chaversim, $250 Nat'l Jewish Center for Learning and Leadership. $250

Children

of the Night

November 6 Healthcare Corporation $2000 charitable contribution to: $1000 Oxfam, $500 SOVA Food Pantry, $500 Venice FAmily Clinic

Reporting Individual's Name

Waxman

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT — Examples: S — ABC Corporation Stock				X								X									X							X
Examples: George Wash. Credit Union Accounts					X									X									X					
Examples: 182 Main Street, Dover, Delaware						X							X									X						
	Maryland Federal Savings & Loan			X										X							X							
	California Pension Administrators																											
	(Keogh) (a) Real Estate Investment Trust of California			X								X									X							X
	(b) Santa Anita Realty Enterprise			X								X									X							X
	(c) Newhall Land & Farming Co., California			X								X									X							X

For additional assets and unearned income, use next page

Schedule III

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Waxman

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
		Year End Value (X)										Type of Income (X)							Category of Amount of Income (X)									
S, DC, JT	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
	IRA			X																								
	Painewebber Retirement Money Market Acct			X										X							X							
	Newhall Land & Farming Co.			X								X									X							
	Real Estate Investment Trust-Calif.			X								X									X							
	Santa Anita Realty Enterprise			X								X									X							

Schedule III—Continuation

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Reporting Individual's Name: Waxman

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	IRA											
	Painewebber Retirement Money Market Account		X		5/22/92	X						
	City National Corporation	X			5/22/92	X						
	City National Corporation		X		9/17/92	X						
	Treasury Bonds	X			9/17/92	X						

Reporting Individual's Name
Waxman

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
California Nuerological Surgeons Laguana Niguel, CA	1/24-27/92	none	3 nights	Y	wife	none
Los Angeles Radiologists ~~Los Angeles, Ca. Century Plaza~~ Hotel	1 /31/92 2/1/92	2 roundtrip airfare tickets Wash-LA-Wash	2 nights	Y	wife	none
National Health Lawyers Assoc. Laguana Niguel, CA	6/12-13/92	2 roundtrip airfare tickets Wash-LA-Wash	2 nights	Y	son	none
American Israel education Foundation (AIPAC) Leromme Hotel Jeruaalem	12/27/92 1/2/93	Wash-JFK-Tel Aviv-Wash	6 nights	Y	wife	2 nights
State of Hawaii, Hilton Honalulu	8/16-18/92	none	3 nights	Y	wife	2 nights
Kaiser Foundation Health Plan Four Seasons, Maui, Hawaii	8/19-22/92	Wash-LA-Honolulu-Lanai Honolulu-LA-Wash	3 nights	Y	wife	

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UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

Wayne Curtis Weldon
(Full Name)

49 Weathervane Road
(Mailing Address)

Daytime Telephone: 202-225-2011

Aston, Pennsylvania 19014

Filer Status	[X] Member of the U.S. House of Representatives	State PA District 7th	[ ] Officer or Employee — Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

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MAY 17 1993
(Office Use Only)

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6 § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6 § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Wayne Curtis Weldon

DATE (Month, Day, Year) 5/17/93

Reporting Individual's Name
Wayne Curtis Weldon

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Crozer-Chester Medical Center	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

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Reporting Individual's Name
Wayne Curtis Weldon

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

Source	Activity	Date	Amount
Examples: Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
XYZ Megazine	Article	Aug. 13, 1992	$500
National Association of Independent Insurers	Speech	April 7, 1992	$500
Women's Association of the Bryn Mawr Presbyterian Church	Speech	April 28, 1992	$100
St. Joseph's University Principal's Summer Institute	Speech	July 10, 1992	$250

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Reporting Individual's Name

Wayne Curtis Weldon

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year end (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT Examples: S ABC Corporation Stock		X									X								X								X
George Wash. Credit Union Accounts				X									X									X					
182 Main Street, Dover, Delawere					X							X									X						
Springfield Federal Savings		X											X						X								
Congressional Fed. Credit Union		X											X						X								
Franklin Mint Credit Union		X											X						X								
700 4th Street, Washington, DC						X						X											X				

For additional assets and unearned income, use next page

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Reporting Individual's Name
Wayne Curtis Weldon

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	Franklin Mint Federal Credit Union	Mortgage on 700 4th St, Wash. DC				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Reporting Individual's Name

Wayne Curtis Weldon

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

Source		Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
Institute for Life Safety Tech.& Emergency Mgmt Education		Feb. 6-7	Wash. D.C.-Orlando-Phila.	Y	Y	None	N
Intn'l Society of Fire Service Instructors - 64th Annual		Apr. 12-13	Phila.-Cincinnati-Phila.	Y	Y	None	N
Underwriters Laboratories Tour & Management Meeting		July 17	Phila.-Illinois-Phila.	N	N	None	N
Indiana State Firefighters Caucus - 1st Annual Dinner		Nov. 16	Phila.-Indiana	N	N	None	N
Pennsylvania Fire Services Institute - Annual Dinner		Nov. 16	Indiana-Harrisburg-Phila.	N	N	None	N

This page may be copied if more space is required.

Reporting Individual's Name
Wayne Curtis Weldon

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
None	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government, or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26

Date	Parties To	Terms of Agreement
1/2/87	CIGNA, Inc.	Leave of absence, with no pay or benefits.

GPO 1992 96-838A (PN)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

MAY 17

HAND DELIVERED

(6)

Alan D. Wheat
(Full Name)

11820 Troost Kansas City, Missouri 64131
(Mailing Address)

Daytime Telephone: 202-225-4535

Filer Status	[X] Member of the U.S. House of Representatives — State: MO District: 5	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

MC (Office Use Only)

4258

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file, this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — **DATE (Month, Day, Year)** 5-17-93

Reporting Individual's Name
Alan D. Wheat

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$8,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Counta and Kanne	Spouse salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

70-599 O—93——48

Reporting Individual's Name
Alan D. Wheat

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples.	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
JT	1251 S. Carolina St. SE Wash. DC							X						X											X					
JT	Wright Patman Fed. Credit Union				X										X							X								
JT	Dominion Bank, DC				X										X							X								

For additional assets and unearned income, use next page

4260

Reporting Individual's Name
Alan D. Wheat

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Dominion Bank of Virginia	Mortgage on 1251 S. Carolina St SE Washington, DC				X			

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22

Source	Brief Description	Value
Example: Mrs Joseph H Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
	N/A	

Use additional sheets if more space is required.

Reporting Individual's Name

Alan D. Wheat

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Domestic Policy Planning Session ~~Congressional Black Caucus Foundation~~	Feb.21-24	Wash.,DC-Orlando-Wash.,DC	Y	Y	Spouse	N
	Oxfam, America Boston, MA	March 27-28	Wash.,DC-Boston-Wash.,DC	Y	Y	None	N
	Orientation for newly elected Members of the CBC	Nov.10-11	Wash.,DC-Atlanta-Kansas City	Y	Y	None	N
	Congressional Black Caucus Foundation						
	Danny Thompson Foundation	Aug. 17-23	Kansas City-Elkhorn-Wash., DC	Y	Y	Spouse	3 days

This page may be copied if more space is required.

Reporting Individual's Name
Alan D. Wheat

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
President	Congressional Black Caucus Foundation
Board of Directors	Oxfam America
Board of Directors	The National Fund for the United States Botanic Garden
Board of Directors	Martin Luther King Holiday Commission

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 28.

Date	Parties To	Terms of Agreement
	N/A	

GPO: 1986 O-425A (m)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 PM 4:00
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED
MC (3)
(Office Use Only)

Jamie L. Whitten
(Full Name)

5804 Nebraska Avenue, N.W.
(Mailing Address) Daytime Telephone

Washington, D.C. 20015

Filer Status	[X] Member of the U.S. House of Representatives — State: MS District: 1st	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL Jamie L. Whitten	**DATE (Month, Day, Year)** 5/13/93

Reporting Individual's Name

Jamie L. Whitten

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT — Examples: S — ABC Corporation Stock			X								X									X									X
George Wash. Credit Union Accounts				X									X									X							
182 Main Street, Dover, Delaware					X							X									X								
Morgan Furn. Bldg., Oxford				X								X								X									
Locker Rm. Bldg, Oxford					X							X											X						
2 store bldgs. Oxford					X							X											X						
Oxford Eagle Bldg. , Oxford				X								X									X								
Farmland, Charleston, Ms.				X								X											X						
Tallahatchie Cty, Ms. bank stock			X								X								X										

See additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Jamie L. Whitten

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Wright Patman Credit Un. Acct							X						X											X				
Pepsico stock			X								X									X								
1st Natl Holding, Oxford			X								X									X								
Sunburst Bank, Charleston			X										X								X							
1/2 int. in 145 ac. farm Lee County			X									X								X								
1/3 int. in land, Lee County, MS			X									X						X										
Treasury Notes			X										X								X							
Series HH Bonds						X							X											X				
U.S. Savings Bonds			X										X								X							
Pullman Stock		X									X								X									
Allied Signal Stock		X									X									X								
Bolsa Chica Stock		X									X									X								
Univ. Ms. EDL Bldg, Corp. Stock				X									X							X								

Schedule III—Continuation

JAMIE L. WHITTEN
1ST DISTRICT, MISSISSIPPI
2314 HOUSE OFFICE BUILDING
(202) 225-4306

COMMITTEE ON APPROPRIATIONS

Congress of the United States
House of Representatives
Washington, DC 20515-2401

May 25, 1993

OFFICE OF RECORDS & REGISTRATION
1993 JUN -4 AM 10 20
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES
INSIDE MAIL

1

✓ MC

Honorable Donnald K. Anderson
Clerk of the House
U. S. House of Representatives
H105 The Capitol
Washington, D. C. 20515

Dear Mr. Anderson:

In order to clear up an apparent inconsistency, I would like to amend my 1992 Financial Disclosure Statement.

Bolsa Chica Stock which is listed in the 1992 filing acquired Signal Co. Henley Stock which was listed in 1991. This resulted in a name change but not a physical or monetary transaction on my part.

I hope this clears up the situation and if anything further is needed please let me know.

Sincerely,

Jamie Whitten

Jamie L. Whitten, M. C.

JLW:jef

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 14 PM 12 04

Pat Williams
(Full Name)

2457 Rayburn
(Mailing Address)

202/225-3211
Daytime Telephone

Washington, DC 20515

8

HAND DELIVERED

MC

(Office Use Only)

Filer Status	[XX] Member of the U.S. House of Representatives	State: Montana District: At Large	[ ] Officer or Employee	Employing Office:
Report Type	[XX] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

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Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [XX]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [XX]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [XX]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [XX]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [XX]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [XX]
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EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [XX]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

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SIGNATURE OF REPORTING INDIVIDUAL Pat Williams

DATE (Month, Day, Year) May 13, 93

4268

Reporting Individual's Name
Pat Williams

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Peace Links	Spouse Salary	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4269

Reporting Individual's Name

Rep. Pat Williams

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	Tobacco Institute	Speech	1/16/92	$2000
	The Washington Caucus	Speech	1/29/92	$ 500
	Montana Tribal College Assn	Speech	3/28/92	$ 100
	Mansfield Foundation	Speech	5/18/92	$2000
	The Connell Company	Speech	11/30/92	$2000

This page may be copied if more space is required.

Reporting Individual's Name
Pat Williams

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X								X									X									X
			George Wash. Credit Union Accounts				X									X									X							
			182 Main Street, Dover, Delaware					X							X									X								
	Wright Patman FCU, Washington, D.C.							X								X									X							
	415 S. 6th E., Missoula, MT						X								X									X								
	Dean Witter Asset Fund/Money Market					X								X								X										
	Templeton Global					X								X							X											

For additional assets and unearned income, use next page

4271

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Pat Williams

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type) actual amount of income	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	Helena Urban Renewal Bonds $ 5,000			X									X				$360.00		X									
	Columbus Hospital MT State Health Bond $10,000			X									X				$630.00		X									
	Deaconess Medical Center MT State Health Bond $15,000			X									X				$855.00		X									
	St. Patrick's Hospital MT State Health Bond $ 5,000			X									X				$310.00		X									
	Missoula County School Bldg Municipal Bond $ 5,000			X									X				$310.00		X									
	Dean Witter Tax Free Bond Fund $ 6,050			X								X					$390.00		X									
	Waste Management Inc. Stock $ 1,120			X								X					$ 18.20	X										
	Morrison Knudsen Corp. Stock $ 1,075			X								X					$ 40.00	X										
	AFLAC Corp. Stock $ 1,545			X								X					$ 17.60	X										
	Deluxe Corp. Stock $ 686	X										X					$ 21.00	X										
	Dresser Industries Stock $ 630	X										X					$ 18.00	X										
	Ericson Stock $ 1,068			X								X					$ 12.75	X										
	James River Stock $ 397	X										X					$ 12.00	X										
	Dreyfus Corp Stock $ 962	X										X					$ 19.00	X										
	Occidental Pet. Stock $ 1,106			X								X					$ 50.00	X										
	Pepsico Stock $ 1,490			X								X					$ 25.60	X										
	Indesco Stock $ 66 (distribution from Dresser Ind)	X																X										
	Montana Tax Free Bond $ 5,000			X								X					$172.00		X									

Schedule III – Continuation

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Reporting Individual's Name
Pat Williams

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Montana Tax Free Bond	X			11/92	X						

Reporting Individual's Name
Pat Williams

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances, and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			S $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Firemen's Fund	Mortgage on 415 S. 6th East, Missoula, Montana		X					

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Pat Williams

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time. If any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	Tobacco Institute	1/16-18	Blgs, MT/Palm Springs/DC	Y	Y	none	N
	Philip Morris	2/14-18	Butte/Palm Beach/DC	Y	Y	spouse	N
	Montana Tribal College Assn	3/28	Bozeman, MT/Billings, MT	N	N	none	N
	Mansfield Foundation	5/18	DC/Missoula/DC	Y	N	none	N
	The Connell Company	11/28-30	DC/New Jersey/DC	Y	Y	dsughter	N
	American Medical Association	2/27-3/1	DC/W. Palm Beach/DC	Y	Y	spouse	N

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UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

Charles Wilson
(Full Name)

2256 Rayburn HOB — 202/225-2401
(Mailing Address) — Daytime Telephone

Washington, D.C. 20515

Filer Status	[x] Member of the U.S. House of Representatives — State: Texas District: 2	[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

FILED
1993 MAY 13 PM 2:46
CLERK
U.S. HOUSE OF REPRESENTATIVES

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MC (5)
(Office Use Only)

4276

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [x]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [x]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [x]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [x]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [x]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [x]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Charles Wilson	May 13, 1993

Reporting Individual's Name
Charles Wilson

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see instructions, page 12.

Source	Type	Amount
Examples: State College	Approved Teaching Fee	$6,000
State of Maryland	Legislative Pension	$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
Fairfax County Board of Education	Spouse Salary	NA
Employees Retirement System, State of Texas	Pension	$23,568

For payments to charity in lieu of honoraria, use Schedule II

4277

Reporting Individual's Name: Charles Wilson

SCHEDULE V – LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	First Bank & Trust, Diboll, TX	Personal loans		X					
	Fredonia State Bank, Nacogdoches, TX	Personal loan	X						

SCHEDULE VI – GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
NONE		

Use additional sheets if more space is required.

Reporting Individual's Name

Charles Wilson

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totaling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	The Connell Company	May 1-3	Wash., D.C.-New York-Wash., D.C.	Y	Y	None	N

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Reporting Individual's Name
Charles Wilson

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown

Positions	Name of Organization
Board of Directors	The Kennedy Center for the Performing Arts
Board of Directors	U.S. Naval Academy

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	NONE	

GPO: 1992 50-535A (m)

4280

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 14 PM 3 07

U.S. House of Rep...

HAND DELIVERED

MC (8)

(Office Use Only)

ROBERT E. WISE, JR.
(Full Name)

2434 RAYBURN BUILDING
(Mailing Address)

WASHINGTON, DC 20515

Daytime Telephone: 202/225-2711

Filer Status	[X] Member of the U.S. House of Representatives — State WEST VIRGINIA, District 3rd	[ ] Officer or Employee	Employing Office
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X] No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Robert E. Wise Jr.

DATE (Month, Day, Year): 5/14/93

4281

Reporting Individual's Name

ROBERT E. WISE, JR.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$8,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	U.S. HOUSE OF REPRESENTATIVES	SPOUSE SALARY	NA

For payments to charity in lieu of honoraria, use Schedule II

4282

Reporting Individual's Name

ROBERT E. WISE, JR.

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	BROOKINGS INSTITUTION, WASH., D.C.	SPEECH	NOV. 30, 1992	$400.
	CASUALTY & PROPERTY INSURANCE COMPANIES (CAP-12)	SPEECH	DEC. 11, 1992	$500.

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Reporting Individual's Name

ROBERT E. WISE, JR.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples.	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	WRIGHT PATMAN CREDIT UNION ACCOUNTS						X								X							X							
	DELAWARE FUND				X								X								X								
	PIONEER GROUP, INC. (IRA ACCOUNTS AGGREGATED)						X							NA							NA								

For additional assets and unearned income, use next page

Reporting Individual's Name

ROBERT E. WISE, JR.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure – Destination(s) – Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C. – Chicago – Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C. – Los Angeles – Cleveland	Y	Y	Spouse	4 Days
	ASSOCIATED GENERAL CONTRACTORS	FEB. 28	WASH.,DC--DALLAS--WASH.,DC	N	Y	NONE	N
	DRUG ABUSE RESISTANCE EDUCATION	AUG. 13-14	WASH., DC-- CANAAN VALLEY, WV--WASH.,DC	Y	Y	NONE	N

This page may be copied if more space is required.

Reporting Individual's Name
ROBERT E. WISE, JR.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions**	Name of Organization
DIRECTOR	WEST VIRGINIA FIRST, INC.
DIRECTOR	MAKE-A-WISH FOUNDATION OF SOUTHERN WEST VIRGINIA
EX OFFICIO MEMBER, BOARD OF DIRECTORS	NATIONAL INSTITUTE OF CHEMICAL STUDIES
EX OFFICIO MEMBER, BOARD OF DIRECTORS	REGIONAL CONTRACTING ASSISTANCE CENTER, INC.
PRESIDENT	WEST VIRGINIA STATE SOCIETY OF WASHINGTON, DC

** ALL POSITIONS ARE UNPAID

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO: 1988 [illegible]

4286

1040 U.S. Individual Income Tax Return 1992

Department of the Treasury—Internal Revenue Service

IRS Use Only—Do not write or staple in this space.

For the year Jan. 1–Dec. 31, 1992, or other tax year beginning , 1992, ending , 19 OMB No. 1545-0074

Label (See instructions on page 10.) Use the IRS label. Otherwise, please print or type.

LABEL H E R E

Your first name and initial: ROBERT E. WISE, JR. Last name:

If a joint return, spouse's first name and initial: SANDRA C. WISE Last name:

Home address (number and street). If you have a P.O. box, see page 10: 101 GABE ROAD Apt. no.:

City, town or post office, state, and ZIP code. If you have a foreign address, see page 10.: CLENDENIN, WV 25045

Your social security number: 233 : 78 : 6863

Spouse's social security number: 474 : 50 : 2621

For Privacy Act and Paperwork Reduction Act Notice, see page 4.

Presidential Election Campaign (See page 10.)

Do you want $1 to go to this fund? X Yes No

If a joint return, does your spouse want $1 to go to this fund? X Yes No

Note: Checking "Yes" will not change your tax or reduce your refund.

Filing Status (See page 10.) Check only one box.

1 Single

2 X Married filing joint return (even if only one had income)

3 Married filing separate return. Enter spouse's social security no. above and full name here ▶

4 Head of household (with qualifying person). (See page 11.) If the qualifying person is a child but not your dependent, enter this child's name here. ▶

5 Qualifying widow(er) with dependent child (year spouse died ▶ 19). (See page 11.)

COPY

Exemptions (See page 11.)

6a X Yourself. If your parent (or someone else) can claim you as a dependent on his or her tax return, do not check box 6a. But be sure to check the box on line 33b on page 2

b X Spouse

c Dependents:

(1) Name (first, initial and last name)	(2) Check if under age 1	(3) If age 1 or older, dependent's social security number	(4) Dependent's relationship to you	(5) No. of months lived in your home in 1992
ROBERT W. WISE		236 33 9411	CHILD	12
ALEXANDRA S. WISE		579 17 4278	CHILD	12

If more than six dependents, see page 12

No. of boxes checked on 6a and 6b: 2

No. of your children on 6c who:

- lived with you: 2
- didn't live with you due to divorce or separation (see page 13):
- No. of other dependents on 6c:

d If your child didn't live with you but is claimed as your dependent under a pre-1985 agreement, check here ▶ ☐

e Total number of exemptions claimed: Add numbers entered on lines above ▶ 4

Income

Attach Copy B of your Forms W-2, W-2G, and 1099-R here.

If you did not get a W-2, see page 9.

Attach check or money order on top of any Forms W-2, W-2G, or 1099-R.

7	Wages, salaries, tips, etc. Attach Form(s) W-2	7	225,578.
8a	Taxable interest income. Attach Schedule B if over $400	8a	526.
b	Tax-exempt interest income (see page 15) DON'T include on line 8a: 8b		
9	Dividend income. Attach Schedule B if over $400	9	141.
10	Taxable refunds, credits, or offsets of state and local income taxes from worksheet on page 16	10	2,373.
11	Alimony received	11	
12	Business income or (loss). Attach Schedule C or C-EZ	12	
13	Capital gain or (loss). Attach Schedule D	13	
14	Capital gain distributions not reported on line 13 (see page 15) DELAWARE GROUP	14	42.
15	Other gains or (losses). Attach Form 4797	15	
16a	Total IRA distributions: 16a b Taxable amount (see page 16)	16b	
17a	Total pensions and annuities: 17a b Taxable amount (see page 16)	17b	
18	Rents, royalties, partnerships, estates, trusts, etc. Attach Schedule E	18	
19	Farm income or (loss). Attach Schedule F	19	
20	Unemployment compensation (see page 17)	20	
21a	Social security benefits: 21a b Taxable amount (see page 17)	21b	
22	Other income. List type and amount—see page 18	22	
23	Add the amounts in the far right column for lines 7 through 22. This is your total income ▶	23	228,660.

Adjustments to Income (See page 18.)

24a	Your IRA deduction from applicable worksheet on page 19 or 20	24a	
b	Spouse's IRA deduction from applicable worksheet on page 19 or 20	24b	
25	One-half of self-employment tax (see page 20)	25	
26	Self-employed health insurance deduction (see page 20)	26	
27	Keogh retirement plan and self-employed SEP deduction	27	
28	Penalty on early withdrawal of savings	28	
29	Alimony paid. Recipient's SSN ▶ : :	29	
30	Add lines 24a through 29. These are your total adjustments ▶	30	

Adjusted Gross Income

31 Subtract line 30 from line 23. This is your adjusted gross income. If this amount is less than $22,370 and a child lived with you, see page EIC-1 to find out if you can claim the "Earned Income Credit" on line 56 ▶ 31 228,660.

ROBERT E. WISE, JR. & SANDRA C. WISE 233-78-6863

Form 1040 (1992) Page 2

Tax Computation (See page 22.)	32	Amount from line 31 (adjusted gross income)	32	228,660.
	33a	Check if ☐ You were 65 or older, ☐ Blind; ☐ Spouse was 65 or older, ☐ Blind. Add the number of boxes checked above and enter the total here ▶ 33a		
	b	If your parent (or someone else) can claim you as a dependent, check here ▶ 33b ☐		
	c	If you are married filing separately and your spouse itemizes deductions or you are a dual-status alien, see page 22 and check here ▶ 33c ☐		
	34	Enter the larger of your: Itemized deductions from Schedule A, line 28, OR Standard deduction shown below for your filing status. But if you checked any box on line 33a or b, go to page 22 to find your standard deduction. If you checked box 33c, your standard deduction is zero. • Single—$3,600 • Head of household—$5,250 • Married filing jointly or Qualifying widow(er)—$6,000 • Married filing separately—$3,000	34	65,063.
	35	Subtract line 34 from line 32	35	163,597.
	36	If line 32 is $78,950 or less, multiply $2,300 by the total number of exemptions claimed on line 6e. If line 32 is over $78,950, see the worksheet on page 23 for the amount to enter	36	3,864.
	37	Taxable income. Subtract line 36 from line 35. If line 36 is more than line 35, enter -0-	37	159,733.
If you want the IRS to figure your tax, see page 23.	38	Enter tax. Check if from a ☐ Tax Table, b ☒ Tax Rate Schedules, c ☐ Schedule D, or d ☐ Form 8615 (see page 23). Amount, if any, from Form(s) 8814 ▶ e	38	42,268.
	39	Additional taxes (see page 23). Check if from a ☐ Form 4970 b ☐ Form 4972	39	
	40	Add lines 38 and 39 ▶	40	42,268.
Credits (See page 23.)	41	Credit for child and dependent care expenses. Attach Form 2441 — 41: 960.		
	42	Credit for the elderly or the disabled. Attach Schedule R — 42		
	43	Foreign tax credit. Attach Form 1116 — 43		
	44	Other credits (see page 24). Check if from a ☐ Form 3800 b ☐ Form 8396 c ☐ Form 8801 d ☐ Form (specify) — 44		
	45	Add lines 41 through 44	45	960.
	46	Subtract line 45 from line 40. If line 45 is more than line 40, enter -0- ▶	46	41,308.
Other Taxes	47	Self-employment tax. Attach Schedule SE. Also, see line 25	47	
	48	Alternative minimum tax. Attach Form 6251	48	
	49	Recapture taxes (see page 25). Check if from a ☐ Form 4255 b ☐ Form 8611 c ☐ Form 8828	49	
	50	Social security and Medicare tax on tip income not reported to employer. Attach Form 4137	50	
	51	Tax on qualified retirement plans, including IRAs. Attach Form 5329	51	
	52	Advance earned income credit payments from Form W-2	52	
	53	Add lines 46 through 52. This is your total tax ▶	53	41,308.
Payments Attach Forms W-2, W-2G, and 1099-R on the front.	54	Federal income tax withheld. If any is from Form(s) 1099, check ▶ ☐ — 54: 50,999.		
	55	1992 estimated tax payments and amount applied from 1991 return — 55		
	56	Earned income credit. Attach Schedule EIC — 56		
	57	Amount paid with Form 4868 (extension request) — 57		
	58	Excess social security, Medicare, and RRTA tax withheld (see page 26) — 58		
	59	Other payments (see page 26). Check if from a ☐ Form 2439 b ☐ Form 4136 — 59		
	60	Add lines 54 through 59. These are your total payments ▶	60	50,999.
Refund or Amount You Owe	61	If line 60 is more than line 53, subtract line 53 from line 60. This is the amount you OVERPAID ▶	61	9,691.
	62	Amount of line 61 you want REFUNDED TO YOU ▶	62	9,691.
	63	Amount of line 61 you want APPLIED TO YOUR 1993 ESTIMATED TAX ▶ 63		
Attach check or money order on top of Form(s) W-2, etc., on the front.	64	If line 53 is more than line 60, subtract line 60 from line 53. This is the AMOUNT YOU OWE. Attach check or money order for full amount payable to "Internal Revenue Service." Write your name, address, social security number, daytime phone number, and "1992 Form 1040" on it	64	
	65	Estimated tax penalty (see page 27). Also include on line 64 — 65		

Sign Here Under penalties of perjury, I declare that I have examined this return and accompanying schedules and statements, and to the best of my knowledge and belief, they are true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

Keep a copy of this return for your records.

Your signature	Date	Your occupation: CONGRESSMAN
Spouse's signature if a joint return, BOTH must sign.	Date	Spouse's occupation: ATTORNEY

Paid Preparer's Use Only

Preparer's signature	Date: 3-29-93	Check if self-employed ☒	Preparer's social security no.: 205 : 34 : 9306
Firm's name (or yours if self-employed) and address: T. P. CHEGWIDDEN, CPA, P.O. BOX 2863, CHARLESTON, WV 25330		E.I. No.: 55 : 0633379	ZIP code

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(4)

RECEIVED
1993 MAY 17 AM 9:25
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

Frank R. Wolf
(Full Name)

1453 Hunter Mill Road
(Mailing Address)

(202) 225-5136
Daytime Telephone:

Vienna, Virginia 22182

Filer Status	[X] Member of the U.S. House of Representatives — State: VA District: 10	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

mc **HAND DELIVER**
(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Frank R. Wolf	**DATE (Month, Day, Year)** May 14, 1993

4289

Reporting Individual's Name

Frank R. Wolf

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							Category of Amount of Income (X)									Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S	ABC Corporation Stock			X								X									X							X
		George Wash. Credit Union Accounts				X									X									X					
		182 Main Street, Dover, Delaware					X							X									X						
	1st Union Bank of Va., Bank Acct				X										X							X							
	NVR Savings Bank Accounts				X										X					X									
	Nationsbank, CD (matured 2/92)		X												X					X									
	Franklin Income Fund				X								X			X							X						X
	Franklin Virginia Fund				X								X									X							
	U.S. Savings Bonds				X										X							X							X

For additional assets and unearned income, use next page

4290

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Frank R. Wolf

S, DC, JT	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X) A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.																												
	Franklin Income Fund non-discretionary Keogh						X						N/A																
	Smith-Barney Money Fund non-discretionary IRA			X									N/A																
	Oppenheimer Target Fund non-discretionary IRA				X								N/A																
	No. American Security Life Ins. Co. NASL Series Trust Fund - non-participating retirement plan			X									N/A																X

Schedule III—Continuation

Reporting Individual's Name
Frank R. Wolf

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

		Type of Transaction (X)				Amount of Transaction						
		Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
S, DC, JT	Identification of Assets											
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	U.S. Savings Bonds		x		1/3/92	x						
	U.S. Savings Bonds	x			monthly	x						
	Franklin Income Fund - shares		x		1/27/92	x						
	No. American Security Life Ins. Co. - NASL ~~Series Trust Fund - Retirement Plan~~	x			monthly	x						

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 13 AM 8 12
INSIDE MAIL

Lynn C. Woolsey
(Full Name)

923 B St.
(Mailing Address)

(202)225-5161
Daytime Telephone

Petaluma, CA 94952

Filer Status	[X] Member of the U.S. House of Representatives	State: CA District: 6	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

(Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ] No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X] No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ] No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL: Lynn C. Woolsey

DATE (Month, Day, Year): 5/11/93

4293

Reporting Individual's Name
Lynn C. Woolsey

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Woolsey Personnel Service	Salary	$5,000
	City of Petaluma	Salary	240

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4294

Reporting Individual's Name
LYNN C. WOOLSEY

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT Examples: S	ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
NATURAL RES. DEV. SEC.				X								X								X									
PACIFIC TELESIS GROUP (IRA)				X								X								X									
MERRIL LYNCH FUND FOR TOMORROW - CLASS B (IRA)			X									N/A								N/A									
PUTNAM OTC EMERGING GROWTH FUND (IRA)				X								N/A								N/A									
U.S. TREASURY STRIPS ZERO % 11/15/2003 (IRA)				X								N/A								N/A									
U.S. TREASURY STRIPS ZERO % 11/15/2003 (IRA)				X								N/A								N/A									

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: LYNN C. WOOLSEY

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	NORDSTROM, INC. (IRA)			X								X								X									
	COLONIAL TRUST III GROWTH SHARES FUND (IRA)			X								N/A							N/A										
JT	DEAN WITTER LIQUID ASSET FUND		X									N/A							N/A										
	LOAN TO WOOLSEY FOR CONGRESS - 1992				X													RETURN OF PRINCIPAL					X						

Reporting Individual's Name
Lynn C. Woolsey

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
City Council	City of Petaluma
Owner	Woolsey Personnel Service

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1992 50-535A (pc)

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

(7)

RECEIVED
1993 MAY 17 PM 12:52
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

HAND DELIVERED

MC (Office Use Only)

Ronald L. Wyden
(Full Name)

1111 Longworth House Office Building 202-225-4811
(Mailing Address) Daytime Telephone

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: Oregon District: 3rd	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "accepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [X]	No [ ]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
Ron Wyden	May 14, 1993

4298

Reporting Individual's Name

Ronald L. Wyden

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Inova Services	Spousal Fees	NA
	Washington Hospital Center	Spousal Fees	NA
	Dr. Sue Bailey	Spousal Fees	NA

For payments to charity in lieu of honoraria, use Schedule II

Reporting Individual's Name
Ronald L. Wyden

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																		Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock		X								X									X								X
			George Wash. Credit Union Accounts			X									X									X						
			182 Main Street, Dover, Delaware				X							X									X							
	Riggs National Bank				X										X								X							
	House, 2814 N.E. Knott;Portland, OR					X								X	X										X					
	U.S. Treasury Bonds					X						Value at maturity			X								X							
	Israel Bonds				X							" "																		
	Oregon Baccalaureate Bonds							X							X									X						

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Ronald L. Wyden

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S Laurie Wyden Trust: holding these assets:							Y					XX													X		X
49% interest in Oseran Investment real property at 2337 NW 30th St., 2740 NW 22nd Place, and 2901 NW Front Ave, Portland, OR																											
- 21% interest in Foster-Oseran in turn holds interest in: real property at 817-821 2nd Ave. Portland; and 1320, 1360, and 1370 Hill St., El Cajon, California																											
-Foster-Oseran has a 10% interest in the 30th Group in turn holds interest in: real property at 1333 30th St., San Diego, CA; and 5465 Western Ave., Beaverton Oregon and 8611 N. Columbia Blvd., Portland, Oregon																											

Reporting Individual's Name
Ronald L. Wyden

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Laurie Wyden Trust: Front Ave. Property, Portland, OR	X			August 1992				X			

4302

Reporting Individual's Name
Ronald L. Wyden

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
Examples: ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
National Academy of Elder Law Attorneys	May 2	Wash.,D.C. to San Francisco to Portland, Oregon	N	N	None	N
Jones, Day, Reavis and Pogue Attnys at Law	Dec. 4	Wash.,D.C. - Cleveland to Wash., D.C.	N	N	None	N

This page may be copied if more space is required.

Reporting Individual's Name
Ronald L. Wyden

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Board of Directors	Sight Savers International (uncompensated)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
None		

GPO: 1992 89-038A (pm)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

MAY 17

Albert Russell Wynn
(Full Name)

423 Cannon House Office Building (202) 225-8699
(Mailing Address) Daytime Telephone

Washington, D.C. 20515-2004

Filer Status	[X] Member of the U.S. House of Representatives	State: Maryland District: 4th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

HAND DELIVERED (8)
mc (Office Use Only)

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes	[X]	No	[ ]	Did you, your spouse, or a dependant child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II**	Yes	[ ]	No	[X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes	[ ]	No	[X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes	[ ]	No	[X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes	[ ]	No	[X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependant child? (See Instructions, page 10.)	Yes	[ ]	No	[X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes	[ ]	No	[X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL: Albert R. Wynn

DATE (Month, Day, Year): 5-17-93

4305

Reporting Individual's Name
Albert R. Wynn

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	State of Maryland	Salary	25,000.00
	Albert R. Wynn & Associates	Legal Fees	28,000.00
	Baltimore City	Spouse Salary	N/A

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4306

Reporting Individual's Name
Albert R. Wynn

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500

This page may be copied if more space is required.

Reporting Individual's Name
Albert R. Wynn

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)											Transaction (X)
			None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X							X									X								X
			George Wash. Credit Union Accounts				X								X									X						
			182 Main Street, Dover, Delaware					X						X									X							
	1213 T Street, N.W. Washington, D.C.								X					X									X							
	7745 Greymont Street Hyattsville, MD						X							X										X						

For additional assets and unearned income, use next page

Reporting Individual's Name

Albert R. Wynn

SCHEDULE IV – TRANSACTIONS

Report any purchases, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.		Type of Transaction (X)				Amount of Transaction						
S, DC, JT	Identification of Assets	Purchase	Sale	Exchange	DATE (MO, DAY, YR)	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				

Schedule IV

Reporting Individual's Name
Albert R. Wynn

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	GMAC Mortgage Company	Mortgage on: 1213 T Street, N.W., Wash., DC				X			
	GMAC Mortgage Company	Mortgage on: 7745 Greymont St., Hyattsville			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

Albert R. Wynn

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342), travel paid for by campaign funds, travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days

This page may be copied if more space is required.

Reporting Individual's Name
Albert R. Wynn

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Owner/Proprietor	Albert R. Wynn and Associates (Law Practice)

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement

GPO 1988 [illegible]

4312

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
CLERK OF THE HOUSE
1993 MAY -5 PM 2 58
OFFICE OF THE CLERK
U.S. HOUSE OF REPRESENTATIVES

27

HAND DELIVERED

MC (Office Use Only)

Sidney R. Yates
(Full Name)

2109 Rayburn House Office Building (202) 225-2111
(Mailing Address) Daytime Telephone

Washington, DC 20515

Filer Status	[X] Member of the U.S. House of Representatives	State: IL District: 9th	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [ ]	No [X]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [ ]	No [X]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions. (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001)

SIGNATURE OF REPORTING INDIVIDUAL Sidney R. Yates **DATE (Month, Day, Year)** 5/5/93

4313

Reporting Individual's Name

Sidney R. Yates

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name

Sidney R. Yates

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13.

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	None			

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Reporting Individual's Name

Sidney R. Yates

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source			BLOCK B Valuation of Asset										BLOCK C Income																	Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.			Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
			A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S, DC, JT	Examples	S	ABC Corporation Stock		X								X									X								X
			George Wash Credit Union Accounts			X								X										X						
			1&2 Main Street, Dover, Delaware				X						X										X							
	Common Stock Aon Corp					X							X									X								
	Common Stock Hubbell Corp Class B							X					X											X						
	Common Stock IBM Corp				X								X										X							
	Common Stock Lehman (Soloman Bros. E)				X								X								X									
	Common Stock Lehman (Sol. Bros. End)				X											X					X									
	continued																													

For additional assets and unearned income use next page

Schedule III

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX over $100,000	
Common Stock Wang Lab. Class B		X									X							X									
Common Stock Material Science		X									X							X									
New York City, NY PHA Bond				X									X							X							
Springfield, MA PHA Bond			X										X							X							
Baytown, TX Bond			X										X							X							
Philadelphia, PA PHA Bond			X										X							X							
Boston, MA PHA Bond				X									X							X							
New Castle, PA Bond			X										X							X							
Kentucky State Bond				X									X								X						
South Bend, IN PHA Bond				X									X						X								
Nashville, TN PHA Bond				X								X							X								
Minneapolis, MN PHA Bond				X								X									X						
Minneapolis, MN PHA Bond				X								X									X						
Kansas City, MO PHA Bond					X								X									X					
Detroit, MI PHA Bond					X								X										X				

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
El Paso, TX PHA Bond					X									X							X							
Waco, TX PHA Bond						X								X									X					
Richmond, VA PHA Bond					X									X					X									X
Chattanooga, TN PHA Bond					X									X				X										X
Twin Falls, ID PHA Bond				X										X					X									X
Richmond, VA PHA Bond					X									X						X								X
Tulsa, OK PHA Bond				X										X					X									X
Wadena, MN PHA Bond					X									X						X								X
Reno, NV PHA Bond				X										X					X									X
Sherman, TX PHA Bond				X										X					X									X
Dover, NH PHA Bond					X									X				X										X
Red Cloud, NE PHA Bond					X									X							X							X
Reno NV, PHA Bond				X										X					X									X
Tacoma WA, PHA Bond					X									X				X										X
Cuyahoga Metro OH, PHA Bond					X									X						X								X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

S, DC, JT	BLOCK A Asset and/or Income Source (You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.)	BLOCK B Valuation of Asset: Year End Value (X) — A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	BLOCK C Income: Type of Income (X) — DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	Category of Amount of Income (X) — I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	BLOCK D Transaction (X)
	Louisville, KY PHA Bond				X									X					X										X
	Knoxville, TN PHA Bond			X										X						X									X
	Paducah, KY PHA Bond			X										X					X										X
	Cheyenne River SD, PHA Bond				X									X					X										X
	Honolulu, HI PHA Bond				X									X					X										X
	Kansas City, KS PHA Bond				X									X								X							X
	Maryville, TN PHA Bond			X										X							X								X
	U.S. Treasury Stripped					X							X							X									X
JT	Series EE United States Savings Bnd.				X									X					X										X
	Intermountain PWR AGY Utah					X								X										X					X
	New York City PHA Bond			X										X							X								X
	New York City PHA Bond				X									X							X								X
	New York City PHA Bond				X									X							X								X
	Jacksonville, FL PHA Bond			X										X						X									X
	Decatur AL PHA Bond				X									X								X							X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	Boston, MA PHA Bond			X										X							X								X
	Cook County, IL PHA Bond				X									X								X							X
	Philadelphia, PA PHA Bond			X										X						X									X
	Oklahoma City, OK PHA Bond				X									X									X						X
	Providence, RI PHA Bond				X									X								X							X
	St. Louis, MO PHA Bond			X										X								X							X
	Minneapolis, MN PHA Bond				X									X									X						X
	Kansas City, MO PHA Bond			X										X								X							X
	Certificate of Deposit 12/9/91 to 1/8/92					X								X								X							X
	Cert. of Deposit 1/13/92 to 2/12/92					X								X								X							X
	Cert. of Deposit 2/25/92 to 3/26/92					X								X								X							X
	Cert. of Deposit 3/27/92 to 4/15/92					X								X						X									X
	Cert. of Deposit 4/15/92 to 5/15/92					X								X								X							X
	Cert. of Deposit 7/2/92 to 7/9/92					X								X						X									X
	Cert. of Deposit 12/16/92 to 1/14/93				X									X					X										X

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
	U.S. Treas. Bill 3/23/92 to 6/18/92					X								X							X								X
	U.S. Treas. Bill 7/22/91 to 7/2/92					X								X								X							X
	U.S. Treas. Bill 9/4/92 to 12/3/92				X									X							X								X
	U.S. Treas. Bill 12/3/92 to 3/4/93						X							X					X										X
	U.S. Treas. Note 5/26/92 to 4/30/93					X								X								X							X
	U.S. Treas. Note 6/5/92 to 6/30/93					X								X								X							X
	U.S. Treas. Note 8/1/91 to 7/31/93						X							X									X						
	U.S. Treas. Note 2/3/92 to 9/30/96				X									X								X							X
	U.S. Treas. Note 10/6/92 to 9/30/97					X								X					X										X
	U.S. Treas. Note 12/13/91 to 6/30/92					X								X								X							X
	U.S. Treas. Note 9/13/91 to 9/30/92					X								X									X						X
	U.S. Treas. Note 7/17/92 to 10/31/92						X							X								X							X
	U.S. Treas. Note 12/12/90 to 11/30/92					X								X								X							X
	U.S. Treas. Note 11/5/91 to 11/30/92						X							X									X						X
	Cert. of Deposit 11/22/91 to 2/24/92					X								X								X							X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
B. DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	New York City PHA Bond			X											X							X							X
	New York City PHA Bond				X										X							X							X
	New York City PHA Bond				X										X							X							X
	Jacksonville, FL PHA Bond			X											X							X							X
	Decatur, AL PHA Bond				X										X							X							X
	Boston, MA PHA Bond			X											X							X							X
	Cook County IL PHA Bond				X										X				X										X
	Philadelphia, PA PHA Bond			X											X						X								X
	Oklahoma City, OK PHA Bond				X										X				X										X
	Providence, RI PHA Bond				X										X								X						X
	Intermountain PWR AGY Utha Bond					X									X				X										X
	St. Louis, MO PHA Bond			X											X							X							X
	Minneapolis, MN PHA Bond				X										X									X					X
	Kansas City, MO PHA Bond			X											X							X							X
	Common Stock Hubbell Corp. Class B							X							X					X									X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Vanguard Muni Money Market Fund					X						X											X					
Vanguard Muni Intermediate Fund					X						X											X					
Vanguard Muni Intermediate Fund					X									X							X						
Vanguard Muni Long Term Fund					X						X											X					X
Vanguard Muni Long Term Fund					X									X							X						X
Bank Accounts				X									X									X					
Real Estate Partnerships: ~~Two shopping Centers:~~						X											Partnership Distribution								X		
a) Allied Stores Shopping Center ~~19.539 acres~~																											
Shelbyville Waterson Expressway ~~St. Mathews, KY~~																											
b) K-Mart Shopping Plaza, 20.10 acres ~~Dixie Highway, Upper Hunters~~																											
Trace, KY																											
University Park Apartment Building ~~1311 Secor, Toledo, OH~~				X													Partnership				X						
Watson & Taylor Ltd. ~~Development and operation of~~				X													Partnership				X						
Warehouse facilities																											

Schedule III—Continuation

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Reporting Individual's Name
Sidney R. Yates

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source				BLOCK B Valuation of Asset										BLOCK C Income																			Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.				Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)												Transaction (X)
				None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S, DC, JT	Examples:	S	ABC Corporation Stock			X								X									X										X
			George Wash. Credit Union Accounts				X									X									X								
			182 Main Street, Dover, Delaware					X							X									X									
S	Common Stock Acorn Fund							X						X										X									
S	Atlantic Richfield 2.8 Cum. Pfrd. Stk.							X						X									X										
s	Common Stock Coca Cola							X						X										X									
s	Common Stock Ford Motor Co.						X							X									X										
s	Common Stock Imo Ind.				X									X								X											
s	Common Stock Navistar				X									X							X												

For additional assets and unearned income, use next page.

Reporting Individual's Name: Sidney R. Yates

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	Common Stock Odetics Class A			X								X							X										
S	Common Stock Occidental Petroleum			X								X									X								
S	Common Stock Peoplea Energy Corp.			X								X									X								
S	Common Stock TRW Inc.			X								X									X								
S	Preferred Stock TRW Inc.			X								X							X										
S	Common Stock Transamerica			X								X								X									
S	Common Stock Toreador Royalty Corp.			X								X							X										
S	First Virginia Banks Inc W/Rts			X								X									X								X
S	New York City, NY PHA Bond				X									X							X								
S	Wichita Falls, TX PHA Bond				X									X								X							
S	Bridgeport, CT PHA Bond			X										X							X								
S	Pineallas County, FL PHA Bond			X										X							X								
S	Salt River, AZ Rev. Bond				X									X															
S	Oklahoma City, OK PHA Bond					X								X								X							
S	Illinois State Bond					X								X								X							

Schedule III—Continuation

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income														BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	East St. Louis, IL PHA Bond				X									X					X										X
S	Fort Worth, TX PHA Bond				X									X							X								X
S	Jamestown, RI PHA Bond				X									X							X								X
S	Gainesville, FL PHA Bond			X										X						X									X
S	Phoenix, AZ PHA Bond			X										X							X								
S	Chicago, IL PHA Bond				X									X							X								X
S	Cuyahoga Metro OH PHA Bond				X									X							X								X
S	Minneapolis, MN PHA Bond					X								X									X						
S	Northport, AL PHA Bond				X									X							X								X
S	Merced Cnty, CA PHA Bond				X									X							X								X
S	Waynesboro, GA PHA Bond				X									X							X								X
S	Yolo County, CA PHA Bond			X										X							X								
S	El Paso, TX PHA Bond				X									X							X								X
S	New York State Bond				X									X								X							
S	Omaha, NE PHA Bond				X									X							X								X

Reporting Individual's Name: Sidney R. Yates

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S	Cert. of Deposit 1/13/92 to 2/13/92					X								X							X								X
S	Cert. of Deposit 9/12/91 to 3/10/92					X								X								X							X
S	Cert. of Deposit 7/2/92 to 7/9/92					X								X						X									X
S	Cert. of Deposit 7/6/92 to 8/6/92					X								X							X								X
S	Cert. of Deposit 8/6/92 to 9/8/92						X							X							X								X
S	U.S. Treas. Bill 7/7/92 to 7/1/93						X							X					X										X
S	U.S. Treas. Bill 8/4/92 to 7/29/93						X							X					X										X
S	U.S. Treas. Bill 12/17/92 to 6/17/93					X								X					X										X
S	U.S. Treas. Bill 7/2/91 to 1/2/92						X							X										X					X
S	U.S. Treas. Bill 7/3/91 to 1/2/92						X							X									X						X
S	U.S. Treas. Note 5/1/92 to 4/30/93					X								X									X						X
S	U.S. Treas. Note 11/23/92 to 5/31/93						X							X							X								X
S	U.S. Treas. Note 3/23/92 to 2/15/95					X								X								X							X
S	U.S. Treas. Note 7/16/92 to 11/15/92						X							X										X					X
S	U.S. Treas. Bill 2/26/92 to 4/30/92						X							X								X							X

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Sidney R. Yates

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
S	U.S. Treas. Bill 7/26/91 to 7/2/92					X								X									X					X
S	U.S. Treas. Bill 7/19/91 to 7/2/92						X							X										X				X
S	U.S. Treas. Bill 8/5/91 to 7/30/92					X								X									X					X
S	U.S. Treas. Bill 9/4/92 to 12/3/92				X									X					X									X
S	U.S. Treas. Bill 9/4/92 to 12/3/92				X									X						X								X
S	U.S. Treas. Bill 9/10/92 to 12/10/92					X								X						X								X
S	Decatur, AL PHA Bond				X									X						X								X
S	Plano, TX Bond				X									X								X						X
S	Cordele, GA PHA Bond				X									X						X								X
S	Cook County, IL PHA Bond				X									X						X								X
S	Clark County, NV Bond				X									X									X					X
S	Indianapolis, IN PHA Bond				X									X							X							X
S	Bank Accounts				X									X								X						
S	Acorn Fund					X									X						X							
S	Vanguard Muni Money Market Fund					X						X										X						

Reporting Individual's Name: Sidney R. Yates

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
S, DC, JT		A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	
S	Decatur, AL PHA Bond			X											X					X								X
S	Clark County, NV Bond			X											X			X										X
S	Plano, TX Bond			X											X			X										X
S	Cordele, Ga PHA Bond			X											X						X							X
S	Cook County, IL PHA Bond			X											X					X								X
S	Indianapolis, IN PHA Bond			X											X						X							X
S	Vanguard Muni Intermediate Fund				X									X								X						
S	Vanguard Muni Intermediate Fund				X										X					X								
S	Alpha I THeatre Partnership, Motion Picture Theatre, Louisville, KY		X														Partnership Distribution				X							
S	Freeport McMoran Resource Partners Limited Partnership, New Orleans, LA			X													Partnership				X							
S	Michigan Adams Building Office Building 200 S. Michigan Chicago, Illinois				X												Partnership	X										

Schedule III—Continuation

Reporting Individual's Name: Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Certificate of Deposit	X			12/16/92		X					
	Certificate of Deposit		X		1/8/92			X				
	Certificate of Deposit	X	X		1/13/92 2/12/92			X				
	Certificate of Deposit		X		2/24/92			X				
	Certificate of Deposit	X	X		2/25/92 3/26/92			X				
	Certificate of Deposit	X	X		3/27/92 4/15/92			X				
	Certificate of Deposit	X	X		4/15/92 5/15/92			X				
	Certificate of Deposit	X	X		7/2/92 7/9/92			X				
	U.S. Treasury Bill	X			12/3/92				X			
	U.S. Treasury Bill	X	X		3/23/92 6/18/92			X				
	U.S. Treasury Bill		X		7/2/92			X				
	U.S. Treasury Bill	X	X		9/4/92 12/3/92		X					
	U.S. Treasury Note	X			5/26/92			X				
	U.S. Treasury Note	X			6/5/92			X				
	U.S. Treasury Note	X			2/3/92		X					
	U.S. Treasury Note	X			10/6/92			X				
	U.S. Treasury Note		X		6/30/92			X				

Reporting Individual's Name

Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H Over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	U.S. Treasury Note		X		9/30/92			X				
	U.S. Treasury Note	X	X		7/17/92 10/31/92				X			
	U.S. Treasury Note		X		11/30/92			X				
	U.S. Treasury Note		X		11/30/92				X			
	U.S. Treasury Stripped	X			11/23/92			X				
	Richmond, VA PHA Bond	X			6/11/92		X					
	Chattanooga, TN PHA Bond	X			12/23/92		X					
	Twin Falls, ID PHA Bond	X			6/26/92	X						
	Richmond, VA PHA Bond	X			5/22/92		X					
	Tulsa, OK PHA Bond	X			7/9/92	X						
	Wadena, MN PHA Bond	X			5/22/92		X					
	Reno, NV PHA Bond	X			6/26/92	X						
	Sherman, TX PHA Bond	X			6/26/92	X						
	Dover, NH PHA Bond	X			11/30/92		X					
	Red Cloud, NE PHA Bond	X			3/4/92		X					
	Reno, NV PHA Bond	X			6/26/92	X						
	Tacoma, WA PHA Bond	X			12/8/92		X					

Reporting Individual's Name
Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Cuyahoga Metro OH, PHA Bond	X			1/21/92		X					
	Louisville, KY PHA Bond	X			11/30/92		X					
	Knoxville, TN PHA Bond	X			6/26/92	X						
	Paducha, KY PHA Bond	X			12/8/92	X						
	Cheyenne River, SD PHA Bond	X			12/8/92		X					
	Honolulu, HI PHA Bond	X			11/20/92		X					
	Kansas City, KS PHA Bond	X			3/27/92		X					
	Maryville, TN PHA Bond	X			1/23/92	X						
JT	Series EE U.S. Savings Bonds	X			10/7/92		X					
	New York City PHA Bond		X		1/1/92	X						
	New York City PHA Bond		X		1/1/92		X					
	New York City PHA Bond		X		1/1/92		X					
	Jacksonville, FL PHA Bond		X		2/1/92	X						
	Decatur, AL PHA Bond		X		3/1/92		X					
	Boston, MA PHA Bond		X		4/1/92	X						
	Cook County, IL PHA Bond		X		4/1/92		X					
	Philadelphia, PA PHA Bond		X		4/1/92	X						

Reporting Individual's Name

Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	Oklahoma City, OK PHA Bond		X		5/1/92		X					
	Providence, RI PHA Bond		X		6/1/92		X					
	Intermountain PWR AGY Utah		X		1/1/92			X				
	St. Louis, MO PHA Bond		X		8/1/92	X						
	Minneapolis, MN PHA Bond		X		9/1/92		X					
	Kansas City, MO PHA Bond		X		12/1/92	X						
	Vanguard Muni Bnd Fnd Long Term	X			5/15/92			X				

Schedule IV

Reporting Individual's Name: Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Certificate of Deposit	X	X		1/13/92 2/13/92			X				
S	Certificate of Deposit		X		3/10/92			X				
S	Certificate of Deposit	X	X		7/2/92 7/9/92			X				
S	Certificate of Deposit	X	X		7/6/92 8/6/92			X				
S	Certificate of Deposit	X	X		8/6/92 9/8/92				X			
S	U.S. Treasury Bill	X			7/7/92				X			
S	U.S. Treasury Bill	X			8/4/92				X			
S	U.S. Treasury Bill	X			12/17/92			X				
S	U.S. Treasury Bill		X		1/2/92				X			
S	U.S. Treasury Bill		X		1/2/92				X			
S	U.S. Treasury Bill	X	X		2/26/92 4/30/92				X			
S	U.S. Treasury Bill		X		7/2/92			X				
S	U.S. Treasury Bill		X		7/2/92					X		
S	U.S. Treasury Bill		X		7/30/92			X				
S	U.S. Treasury Bill	X	X		9/4/92 12/3/92		X					
S	U.S. Treasury Bill	X	X		9/4/92 12/3/92		X					
S	U.S. Treasury Bill	X	X		9/10/92 12/10/92			X				

Reporting Individual's Name
Sidney R. Yates

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependant child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	U.S. Treasury Note	X			5/1/92			X				
S	U.S. Treasury Note	X			11/23/92				X			
S	U.S. Treasury Note	X			3/23/92			X				
S	U.S. Treasury Note	X	X		7/16/92 11/15/92				X			
S	East St. Louis, IL PHA Bond	X			12/9/92		X					
S	Fort Worth, TX PHA Bond	X			7/10/92		X					
S	Jamestown, RI PHA Bond	X			4/13/92		X					
S	Gainesville, FL PHA Bond	X			4/13/92	X						
S	Chicago, IL PHA Bond	X			7/10/92		X					
S	Cuyahoga Metro OH PHA Bond	X			1/21/92		X					
S	Northport, AL PHA Bond	X			7/13/92		X					
S	Merced County, CA PHA Bond	X			2/26/92		X					
S	Waynesboro, GA PHA Bond	X			2/26/92		X					
S	El Paso, TX PHA Bond	X			1/21/92		X					
S	Omaha, NE PHA Bond	X			1/2/192		X					
S	Decatur, AL PHA Bond		X		3/1/92		X					
S	Clark County, NV Bond		X		7/1/92		X					

Reporting Individual's Name: Sidney R. Yates

SCHEDULE IV—TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 30.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
S	Plano, TX Bond		X		7/15/92		X					
S	Cordele, GA PHA Bond		X		9/1/92		X					
S	Cook County, IL PHA Bond		X		12/1/92		X					
S	Indianapolis, IN PHA Bond		X		12/1/92		X					
S	First Virginia Banks, Inc. W/Rts.	X			1/21/92	X						

Reporting Individual's Name
Sidney R. Yates

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor *at any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 – $15,000	C $15,001 – $50,000	D $50,001 – $100,000	E $100,001 – $250,000	F $250,001 – $500,000	G $500,001 – $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	None								

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
None		

Use additional sheets if more space is required.

Reporting Individual's Name

Sidney R. yates

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure–Destination(s)–Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.–Chicago–Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.–Los Angeles–Cleveland	Y	Y	Spouse	4 Days
None							

This page may be copied if more space is required.

Schedule VII

Reporting Individual's Name

Sidney R. yates

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Partner*	see partnerships

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 25.

Date	Parties To	Terms of Agreement
	None	

GPO: 1982 — 50-838A (m)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

C. W. Bill Young
(Full Name)

2407 Rayburn HOB, Washington, D. C. 20515 — 202-225-5961
(Mailing Address) — Daytime Telephone

Filer Status	[x] Member of the U.S. House of Representatives — State: Florida, District: Ten		[ ] Officer or Employee	Employing Office:
Report Type	[x] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date

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U.S. HOUSE OF REPRESENTATIVES

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [x]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [x]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [x]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [x]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [x]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [x]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [x]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [x]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [x]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [x]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report, may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
	May 13, 1993

Reporting Individual's Name

C. W. Bill Young

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts, and, financial interests in or income derived from U S Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)										Block D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X							
	2618 Gulf Blvd. N. #102, Indian Rocks Beach, Florida						X						X									X							
S	Wright Patman Credit Union-IRA			X														NA											
	Note receivable from Judith Flynn					X								X										X					

For additional assets and unearned income, use next page

Reporting Individual's Name
C. W. Bill Young

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001-$15,000	C $15,001-$50,000	D $50,001-$100,000	E $100,001-$250,000	F $250,001-$500,000	G $500,001-$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	First Union Mortgage Company,	Mortgage on 2618 Gulf Blvd.							
	Charlotte, NC	#102, Indian Rocks Beach, FL				X			

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totaling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name

C. W. Bill Young

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. **Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.**

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	National Marrow Donor Program	June 19-22	Wash.,D.C.-Denver-Wash Speaking engagement at Board of Directors Meeting	Y	Y	Spouse	1 Day

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4344

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

1993 MAY 14 AM 8 41

Congressman Donald Edwin Young
(Full Name)

2331 Rayburn HOB, Washington, D.C. 20515
(Mailing Address)

Daytime Telephone 202-225-5765

MC (13)

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(Office Use Only)

Filer Status	[X] Member of the U.S. House of Representatives	State: AK District: At Large	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination	Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [ ]	No [X]	Did you, your spouse, or a dependant child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [X]	No [ ]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [ ]	No [X]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS — Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION — Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL — Don Young

DATE (Month, Day, Year) 5/13/93

Reporting Individual's Name
Don Young

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	None		

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

4345

Reporting Individual's Name
Hon Don Young

SCHEDULE II—PAYMENTS IN LIEU OF HONORARIA MADE TO CHARITY

List the source, activity (i.e., speech, appearance, or article), date, and amount of any payment made by the sponsor of an event to a charitable organization in lieu of an honorarium. A separate confidential list of charities receiving such payments must be filed directly with the Committee on Standards of Official Conduct. An envelope for transmitting the list is included in Members' filing packages. See Instructions, page 13

	Source	Activity	Date	Amount
Examples:	Association of American Associations, Wash., D.C.	Speech	Feb. 2, 1992	$2,000
	XYZ Magazine	Article	Aug. 13, 1992	$500
	None			

This page may be copied if more space is required.

Schedule II

Reporting Individual's Name
Hon. Don Young

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In **BLOCK A** report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street addrase or lot number.

In **BLOCK B** indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In **BLOCK C** indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In **BLOCK D** indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14-19

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Block D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	Transaction (X)
S, DC, JT — Examples: S — ABC Corporation Stock			X								X									X								X
George Wash Credit Union Accounts				X								X										X						
182 Main Street, Dover, Delaware					X							X									X							
Putnam Fund for Growth & Income				X							X											X						
Doyon Ltd., Fairbanks, AK	X										X							X										
State Farm Life			X									X									X							
New York Life				X								X							X									
National Bank of Alaska		X										X							X									
Wright-Patman Congressional Federal Credit Union (IRA)			X								X									X								

For additional assets and unearned income, use next page

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Hon. Don Young

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)					Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
	2835 Alderberry Trail Fairbanks, AK				X								X									X						
	Gwitch Yaa Zhee Native Corp			X								X								X								
	Wright-Patman Congressional Federal Credit Union (SEP)				X							X								X								

Schedule III—Continuation

Reporting Individual's Name: Hon. Don Young

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see Instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
	None											

Schedule IV

4349

Reporting Individual's Name: Hon Don Young

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at *any time* during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see Instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)							
			B $10,001–$15,000	C $15,001–$50,000	D $50,001–$100,000	E $100,001–$250,000	F $250,001–$500,000	G $500,001–$1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del				X			
	National Bank of Alaska	Contract Collections on: 2835 Aldenberry Trail Fairbanks			X				

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see Instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
See Attachment	Young Legal Defense Retirement Fund	

Use additional sheets if more space is required.

Reporting Individual's Name: Hon. Don Young

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see Instructions, pages 24-25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6-13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	National Association of Home Builders	Jan. 21-28	Alaska-Las Vegas-Wash. D.C. Wash. D.C.-Alaska Las Vegas-D.C.	Y Y	Y Y	Self Spouse	4 days 4 days
			Speaking engagement & fact finding trip				

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Reporting Individual's Name
Hon. Don Young

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see Instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
None	

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to future employment, a leave of absence during the period of government service, continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see Instructions, page 26.

Date	Parties To	Terms of Agreement
	None	

GPO 1988 88-635A (#4)

4352

Attachment - Schedule VI Gifts Don Young

U.S. House of Representatives

COMMITTEE ON STANDARDS OF
OFFICIAL CONDUCT

Washington, DC 20515

February 20, 1991

The Honorable Don Young
U.S. House of Representatives
2331 Rayburn House Office Building
Washington, D.C. 20515

Dear Colleague:

This responds to your letter of February 14, 1991, in which you ask the Committee to waive House Rule XLIII, clause 4, for the sole purpose of enabling you to accept the offer of a number of people in Alaska who want to assist you in defraying the costs associated with a recently settled civil action. You also request written confirmation of earlier advice from Committee staff that campaign funds may also be used for the same two purposes.

From your letter, and from discussions between your office and Committee staff, we understand that a lawsuit was brought against you by your 1988 congressional campaign opponent who claimed that he was harmed by statements you made regarding his campaign operation. Although in your view the claim was devoid of merit, you agreed to settle the matter out of court rather than waste any more time and money than had already been expended on the matter prior to trial. While the settlement agreement accepted by the plaintiff contains no admission of fault on your part, it does release both you and your campaign from any future claims by the plaintiff arising out of the 1988 campaign. Your friends and supporters in Alaska have offered to contribute funds to help defray both settlement costs paid to the plaintiff and your own attorney's fees and expenses.

In response to specific requests, this Committee has approved establishment of funds for the exclusive purpose of helping defray the expenses of legal defense in matters relating to their position as an officeholder. Contributions to such funds are considered gifts, subject to the limits of House rules and reportable on Financial Disclosure Statements filed pursuant to title I of the Ethics in Government Act of 1978, as amended.

House Rule XLIII, clause 4, provides that a Member, officer, or employee of the House shall not accept in any calendar year gifts (other than the personal hospitality of an individual or

with a fair market value of $75 or less) aggregating more than $200, directly or indirectly, from any source other than a relative, except to the extent permitted by written waiver granted in exceptional circumstances by the Committee on Standards of Official Conduct.

The House Bipartisan Task Force on Ethics, in its report on the Ethics Reform Act of 1989, stated:

> [G]iven the application of the gifts rule to all sources, it is essential to provide some flexibility to allow the acceptance of gifts above the limit in cases where there is no potential conflict of interest or appearance of impropriety.

Report on H.R. 3660, Cong. Rec. (daily ed.), Nov. 21, 1989, at H9255.

When a Member is required to defend himself in a matter which relates to the performance of official duties, and funds are received to help defray legal expenses, the Committee believes that a waiver of the limits of the House gift rule is appropriate under the following circumstances:

> --A trust fund has been established into which all money donated for legal defense is deposited;
>
> --The trust is administered by an individual with whom the Member has no family, business, or employment relationship;
>
> --The trustee is responsible for overseeing all fund-raising activities benefiting the trust;
>
> --Contributions from any one individual or organization in a calendar year do not aggregate more than $5,000;
>
> --Funds received are used for no purpose other than legal expenses; and
>
> --Excess funds are to be returned to contributors on a pro rata basis or donated to charity.

Of course, a Member may never accept a gift in return for being influenced in the performance of any official act.

Accordingly, pursuant to House Rule XI, clause 4(e)(1)(E), and Rule XLIII, clause 4, to the extent your legal defense fund meets the above criteria, the Committee grants a waiver from House Rule XLIII, clause 4, and authorizes acceptance of donations to the fund of more than $200.

This waiver applies only to the limits on acceptance of gifts in House Rule XLIII, clause 4, not to the requirement that donations be disclosed on the Financial Disclosure Statement you file pursuant to the Ethics in Government Act of 1978.

The Committee also confirms information you received from staff regarding the use of campaign funds for both settlement costs and attorneys fees. House Rule XLIII, clause 6, prohibits all Members from expending campaign funds from their campaign accounts not attributable to bona fide campaign or political purposes. In this case, not only did the action and resulting costs arise directly from the campaign itself, but your campaign committee is also a direct beneficiary of the settlement agreement. Thus, use of campaign funds for settlement costs and attorneys' fees arising from this action is appropriate.

If you have any further questions concerning this matter, please contact the Committee's Office of Advice and Education at extension 5-3787.

Sincerely,

Louis Stokes
Chairman

James V. Hansen
Ranking Minority Member

JS:DJM

Young Legal Defense Retirement Fund
List of Checks Received

1/16/92	CIRI (Cook Inlet Region, Inc.)	$2,500.00
2/14/92	Doyon	$1,000.00
2/21/92	Calista	$5,000.00
7/30/92	Robertson, Monagle & Eastaugh	$3,000.00
8/13/92	Lynden Incorporated	$500.00
8/17/92	G S Ishiyama & Co.	$2,000.00
8/18/92	Sealaska Corporation	$5,000.00
8/20/92	Klukwan, Inc.	$5,000.00
8/20/92	Cook Inlet Regional, Inc. (CIRI)	$1,000.00
8/14/92	Goldbelt	$1,000.00
8/28/92	ARCO	$5,000.00
9/3/92	BP Exploration (Alaska), Inc.	$5,000.00
9/4/92	Ketchikan Pulp Company	$2,000.00
8/12/92	Wards Cove Packing Company	$1,000.00
8/12/92	Trident Seafoods Corporation	$1,000.00
8/12/92	Peter Pan Seafoods, Inc.	$1,000.00
8/12/92	Alyeska Seafoods, Inc.	$1,000.00
8/13/92	Icicle Seafoods, Inc.	$500.00
8/24/92	Ocean Beauty Seafoods, Inc.	$1,000.00
9/4/92	Westward Seafoods, Inc.	$1,000.00
9/21/92	Pacific Seafood Processors Assoc.	$5,000.00
9/28/92	Kennecott	$500.00
	TOTAL:	$50,000.00

UNITED STATES HOUSE OF REPRESENTATIVES

FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992

FORM A
For use by Members, officers, and employees

RECEIVED
1993 MAY 14 AM 11: 20
U.S. HOUSE OF REPRESENTATIVES

MC (7)

HAND DELIVERED
(Office Use Only)

4357

(Full Name) William H. Zeliff Jr.

(Mailing Address) 224 Cannon House office Building — Daytime Telephone: 202-225-5456

Washington, D.C. 20515

Filer Status	[X] Member of the U.S. House of Representatives — State: N.H. District: 1	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [ ]	No [X]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [ ]	No [X]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10.)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11.)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

The Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 8, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 8, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL William H. Zeliff Jr.

DATE (Month, Day, Year) May 15, 1993

Reporting Individual's Name
William H. Zeliff Jr.

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Christmas Farm Inn Inc-Jackson NH 03846	Spouse Salary	N/A —

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
William H. Zeliff Jr.

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year and value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C: Category of Amount of Income (X)									Block D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X							X									X		X						X
	George Wash. Credit Union Accounts				X								X								X							
	182 Main Street, Dover, Delaware					X						X					(Dividends + Rent)											
JT	Christmas Farm Inn Inc Rt 16B Jackson N.H. 03846								X		X	X					Subs.								X			
JT	Christmas Farm Inn Rt 16B Jackson NH 03846								X			X												X				
JT	Christmas Farm Inn DBA Mountain Days Rest. Jackson NH						X					X											X					
JT	Christmas Farm Inn DBA Jackson Corner, Jackson NH					X						X							X									
	* Figures represent a 4/30/93 Fiscal year end — Records are not maintained on a calendar year basis — Christmas Farm Inn is a Sub Chapter S Corporation —																											

Page 3 of 7

For additional assets and unearned income, use next page

Schedule III

4359

Reporting Individual's Name
William H. Zeiff Jr.

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

Continuation Sheet (If needed)

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income															BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	S, DC, JT	Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)									Transaction (X)
		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
JT	Limited Partnership																												
	Broadcasting					X							none																
JT	Christmas Film Fun Inc									X		X						Sub S Income						X					

Page 4 of 7

Schedule III—Continuation

4360

Reporting Individual's Name
William H. Zeliff Jr.

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
JT	Christmas Farm Run — Jackson NH	Stockholder Loans Bill and Sydna Zeliff				X			
JT	Woodstown National Bank & Trust Co	Loan to William H. Zeliff Jr.			X				
JT	1st N.H. Bank — North Conway	CRE Mortgage							X
JT	" " "	Note From Bill + Sydna Zeliff						X	
JT	" " "	Note From Bill + Sydna Zeliff	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year. N/A

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270
N/A		

Use additional sheets if more space is required.

Reporting Individual's Name
William H. Zeliff Jr.

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 8–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	Greater Manchester Jewish Federation	Jan 16-24-92	Round trip Air Travel Wash - Israel - Wash	X	X	Self and Spouse	
	Tom Christo — Rye Beach Foreign Affairs N.H. of Standards Committee	March 20-24	Round trip Air Travel Wash - Kosova — Albania — Wash.	X	X	Self only	
	Freshman Class Retreat Congressional Institute	Dec 4-7-92	Wash - Williamsburg - Wash.	X	X	Self and Spouse	

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Schedule VII

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Reporting Individual's Name
William H. Zeliff Jr.

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Chairman of the	Christmas Farm Inn – Jackson NH 03846
Board	uncompensated

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
	— None —	

GPO: 1992 50-535A (m)

UNITED STATES HOUSE OF REPRESENTATIVES FINANCIAL DISCLOSURE STATEMENT FOR CALENDAR YEAR 1992	FORM A For use by Members, officers, and employees

Dick Zimmer
(Full Name)

136 Locktown-Flemington Road
(Mailing Address)

(202) 225-5801
Daytime Telephone:

Flemington, N.J.

Filer Status	[X] Member of the U.S. House of Representatives — State: NJ District: 12	[ ] Officer or Employee	Employing Office:
Report Type	[X] Annual (May 15)	[ ] Amendment	[ ] Termination — Termination Date:

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PRELIMINARY INFORMATION — ANSWER EACH OF THESE QUESTIONS

Did you or your spouse have "earned" income (e.g., salaries or fees) of more than $200 from any source in the reporting period? **If yes, Complete and Attach Schedule I.**	Yes [X]	No [ ]	Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than $250 and not otherwise exempt)? **If yes, Complete and Attach Schedule VI.**	Yes [ ]	No [X]
Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? **If yes, Complete and Attach Schedule II.**	Yes [ ]	No [X]	Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than $250 from one source)? **If yes, Complete and Attach Schedule VII.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child receive "unearned" income of more than $200 in the reporting period or hold any reportable asset worth more than $1,000 at the end of the period? **If yes, Complete and Attach Schedule III.**	Yes [X]	No [ ]	Did you hold any reportable positions on or before the date of filing in the current calendar year? **If yes, Complete and Attach Schedule VIII.**	Yes [X]	No [ ]
Did you, your spouse, or dependent child purchase, sell, or exchange any reportable asset worth more than $1,000 in the reporting period? **If yes, Complete and Attach Schedule IV.**	Yes [X]	No [ ]	Did you have any reportable agreement or arrangement with an outside entity? **If yes, Complete and Attach Schedule IX.**	Yes [X]	No [ ]
Did you, your spouse, or a dependent child have any reportable liability (more than $10,000) during the reporting period? **If yes, Complete and Attach Schedule V.**	Yes [X]	No [ ]	Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.		

EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANSWER EACH OF THESE QUESTIONS

TRUSTS—Details regarding "Qualified Blind Trusts" approved by the Committee on Standards of Official Conduct and certain other "excepted trusts" need not be disclosed. Have you excluded from this report details of such a trust benefiting you, your spouse, or a dependent child? (See Instructions, page 10)	Yes [ ]	No [X]
EXEMPTION—Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because they meet all three tests for exemption? (See Instructions, page 11)	Yes [ ]	No [X]

CERTIFICATION — THIS DOCUMENT MUST BE SIGNED BY THE REPORTING INDIVIDUAL AND DATED

This Financial Disclosure Statement is required by the Ethics in Government Act of 1978, as amended (5 U.S.C. app. 6, § 101 et seq.). The Statement will be available to any requesting person upon written application and will be reviewed by the Committee on Standards of Official Conduct. Any individual who knowingly and willfully falsifies, or who knowingly and willfully fails to file this report may be subject to civil and criminal sanctions (See 5 U.S.C. app. 6, § 104 and 18 U.S.C. § 1001).

SIGNATURE OF REPORTING INDIVIDUAL	DATE (Month, Day, Year)
[signature]	5/10/93

Reporting Individual's Name
Dick Zimmer

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling $200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; only the source need be reported for other spouse earned income. For further information, see Instructions, page 12.

	Source	Type	Amount
Examples:	State College	Approved Teaching Fee	$6,000
	State of Maryland	Legislative Pension	$9,000
	Civil War Roundtable (Oct. 2nd)	Spouse Speech	$1,000
	Fairfax County Board of Education	Spouse Salary	NA
	Harmony Farm, Delaware Twp., N.J.	Farm Income (JT)	$932.
	Goodspeed House Histories	Spouse Income	NA

For payments to charity in lieu of honoraria, use Schedule II

Schedule I

Reporting Individual's Name
Dick Zimmer

SCHEDULE III—ASSETS AND "UNEARNED" INCOME

In BLOCK A report (a) the identity of each asset held for investment or production of income which had a fair market value exceeding $1,000 as of the close of the year and (b) any other asset or source of "unearned" income which generated $200 or more in income during the reporting period. Exclude: Any personal liability owed to you by your spouse, or by your or your spouse's child, parent, or sibling; any deposits aggregating $5,000 or less in personal savings accounts; and, financial interests in or income derived from U.S. Government retirement programs. For rental property or land, provide the city and a street address or lot number.

In BLOCK B indicate the category of value for each asset listed in Block A. If you use a valuation method other than fair market value, explain the method used. If an asset was sold and is included only because it generated income, the value should be "None".

In BLOCK C indicate the type and category of value of "unearned" income aggregating more than $200 received from assets and sources listed in Block A. For IRA's and retirement plans that are *not* self-directed, you may list only year end value and indicate "NA" for income. You must, however, name the institution holding the IRA.

In BLOCK D indicate if the asset was purchased, sold, or exchanged during the year. If so, provide details on Schedule IV. For more details, see Instructions, pages 14–19.

If you wish to indicate that an asset, income source, or income is that of your spouse or dependent child, or owned jointly, so indicate in the column for that purpose on the far left. (This is optional.) See Instructions, page 17.

	BLOCK A Asset and/or Income Source	BLOCK B Valuation of Asset: Year End Value (X)										BLOCK C Income: Type of Income (X)							BLOCK C Income: Category of Amount of Income (X)									Block D
	You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.	A None	B Less than $1,001	C $1,001 - $15,000	D $15,001 - $50,000	E $50,001 - $100,000	F $100,001 - $250,000	G $250,001 - $500,000	H $500,001 - $1,000,000	over $1,000,000	Indicate if alternative valuation method (X) Attach explanation	DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST	Other Income (Specify type)	I None	II Less than $201	III $201 - $1,000	IV $1,001 - $2,500	V $2,501 - $5,000	VI $5,001 - $15,000	VII $15,001 - $50,000	VIII $50,001 - $100,000	IX $100,001 - $1,000,000	over $1,000,000	Transaction (X)
S, DC, JT	Examples: S ABC Corporation Stock			X								X									X								X
	George Wash. Credit Union Accounts				X									X									X						
	182 Main Street, Dover, Delaware					X							X									X						
	Johnson & Johnson, Pension				X																								
	State of New Jersey, Pension			X																									
	IRA-Dreyfus Family of Funds			X								X			X					X									
S	IRA-Dreyfus Family of Funds			X								X			X					X									
Jt	Dreyfus A Bonds Plus			X								X			X						X								X
Jt	Dreyfus Growth Opportunity Fund			X								X			X					X									X

For additional assets and unearned income, use next page

SCHEDULE III – ASSETS AND "UNEARNED" INCOME

Continuation Sheet (if needed)

Reporting Individual's Name: Dick Zimmer

BLOCK A Asset and/or Income Source		BLOCK B Valuation of Asset										BLOCK C Income																	BLOCK D
You may identify each asset and/or income source as yours, your spouse's (S), your dependent child's (DC), or jointly held (JT) in the left column. This column is optional.		Year End Value (X)									Indicate if alternative valuation method (X) Attach explanation	Type of Income (X)						Other Income (Specify type)	Category of Amount of Income (X)										Transaction (X)
S, DC, JT		None	A Less than $1,001	B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000		DIVIDENDS	RENT	INTEREST	CAPITAL GAINS	EXCEPTED TRUST	QUALIFIED BLIND TRUST		None	I Less than $201	II $201 - $1,000	III $1,001 - $2,500	IV $2,501 - $5,000	V $5,001 - $15,000	VI $15,001 - $50,000	VII $50,001 - $100,000	VIII $100,001 - $1,000,000	IX over $1,000,000	
Jt	Dreyfus N.J. Municipal Bond Fund			X								X									X								X
Jt	Dreyfus N.J. Tax Exempt Money Market Fund			X								X								X									
Jt	Hopewell Township Bond			X								X									X								
Jt	Puerto Rico Power & Electric Authority			X								X																	
Jt	New Jersey Turnpike Authority			X								X									X								
	Johnson & Johnson Common Stock						X					X										X							X
	Johnson & Johnson, 401k Plan					X						X											X						
	State of New Jersey, Deferred Compensation					X						X											X						
Jt	Loan to Zimmer for Congress Committee					X												none											
Jt	Congressional Federal Credit Union			X										X						X									
Jt	Flemington National Bank			X										X						X									
Jt	Somerset Savings Bank			X										X						X									
Jt	South Shore Bank of Chicago			X										X						X									
Jt	Harmony Farm, Delaware Twp. NJ							X										See Part I											
	land, livestock, crops, equipment, etc.																												

Reporting Individual's Name
Dick Zimmer

SCHEDULE IV – TRANSACTIONS

Report any purchase, sale, or exchange by you, your spouse, or dependent child during the reporting period of any real property, stocks, bonds, commodities futures, or other securities when the amount of the transaction exceeded $1,000. Include transactions that resulted in a loss. Do not report a transaction between you, your spouse, or your dependent child or the purchase or sale of your personal residence, unless it is rented out. For further information, see instructions, page 20.

S, DC, JT	Identification of Assets	Type of Transaction (X): Purchase	Sale	Exchange	DATE (MO, DAY, YR)	Amount of Transaction: B $1,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H over $1,000,000
	Example: ABC Corporation Common Stock	X			10-12-92			X				
Jt	Dreyfus Growth Opportunity Fund	X			various		X					
Jt	Dreyfus Growth Opportunity Fund		X		various	X						
Jt	Dreyfus N.J. Municipal Bond Fund		X		various	X						
Jt	Dreyfus A. Bonds Plus		X		9-25-92	X						
	Johnson & Johnson Common Stock - dividend reinvestment	X			various	X						

Reporting Individual's Name
Dick Zimmer

SCHEDULE V—LIABILITIES

Report liabilities of over $10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Check the highest amount owed during the reporting period. Exclude a mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; and liabilities owed to a spouse, child, parent, or sibling of the reporting individual or the reporting individual's spouse. For further information, see instructions, page 21.

S, DC, JT	Creditor	Type of Liability	Category of Amount of Value (X)						
			B $10,001 - $15,000	C $15,001 - $50,000	D $50,001 - $100,000	E $100,001 - $250,000	F $250,001 - $500,000	G $500,001 - $1,000,000	H $1,000,000 over
	Example: First Bank of Wilmington, Delaware	Mortgage on 182 Main St. Dover, Del.				X			
	Raritan Credit Union	stock loan	X						

SCHEDULE VI—GIFTS

Report the source, a brief description, and the value of all gifts totalling more than $250 in value received by you, your spouse, or a dependent child from any source during the calendar year.

Exclusions: Gifts from relatives, gifts of personal hospitality of an individual, and local meals need not be reported. Gifts with a value of $100 or less need not be added towards the $250 disclosure threshold. Gifts to a spouse or dependent child that are totally independent of his or her relationship to you need not be disclosed.

Note: House Rule XLIII, clause 4, limits the total value of gifts a Member, officer, or employee of the House may accept from any one source in a calendar year to $250 in most instances. For further information, see instructions, page 22.

Source	Brief Description	Value
Example: Mrs. Joseph H. Smith, Anytown, USA	Silver Platter (waiver received from Committee on Standards)	$270

Use additional sheets if more space is required.

Reporting Individual's Name
Dick Zimmer

SCHEDULE VII—FACT-FINDING AND SUBSTANTIAL PARTICIPATION TRAVEL

List the identity of the source and a brief description (including travel itinerary, dates, and nature of expenses provided) of travel and travel related expenses totalling $250 or more in value received by you, your spouse, or a dependent child during the reporting period. Indicate any family member who accompanied the traveler at the sponsor's expense, and the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were reimbursed or paid directly by the sponsor.

Exclusions: The following need not be disclosed: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); travel paid for by campaign funds; travel provided to a spouse or dependent child that is totally independent of his or her relationship to you. For further information see instructions, pages 24–25.

	Source	Date(s)	Point of Departure—Destination(s)—Point of Return	Lodging? (Y/N)	Food? (Y/N)	Which Family Member Included?	Any time not at sponsor's expense
Examples:	Chicago Chamber of Commerce	Mar. 2	Wash., D.C.—Chicago—Wash., D.C.	N	Y	None	N
	ABC Corporation	Aug. 6–13	Wash., D.C.—Los Angeles—Cleveland	Y	Y	Spouse	4 Days
	American Israel Education Fund	Jan 9-14	New York. Tel Aviv. New York	Y	Y	—	N
	American Israel Education Fund	Dec. 27, 1992 -Jan 3, 1993	New York-Tel Aviv-New York	Y	Y	Spouse	N

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Reporting Individual's Name
Dick Zimmer

SCHEDULE VIII – POSITIONS

Report all positions, compensated or uncompensated, held during the current calendar year as an officer, director, trustee of an organization, partner, proprietor, representative, employee, or consultant of any corporation, firm partnership, or other business enterprise, any nonprofit organization, any labor organization, or any educational or other institution other than the United States. Exclude positions listed on Schedule I. For further information see instructions, page 25.

EXCLUSIONS: Positions held in any religious, social, fraternal, or political entities, and positions solely of an honorary nature need not be shown.

Positions	Name of Organization
Trustee	Commonwealth of New Jersey, Inc.

SCHEDULE IX – AGREEMENTS

Identify the date, parties to, and terms of any agreement or arrangement with respect to: future employment; a leave of absence during the period of government service; continuation or deferral of payments by a former or current employer other than the U.S. Government; or continuing participation in an employee welfare or benefit plan maintained by a former employer. For further information, see instructions, page 26.

Date	Parties To	Terms of Agreement
1-9-76	Johnson & Johnson, 401k Plan & Pension	Rights are vested pursuant to the terms of these plans. Employer & employee contributions have ceased as of Jan. 1, 1991.

GPO: 1992 50-536A (pq)

4371

Richard A. Zimmer and Marfy Goodspeed
Net Worth as of December 31, 1992

S = M.Goodspeed
Jt = Jointly owned

ASSETS

Cash and Bank Accounts		
Congressional Federal Credit Union	Jt	1,879
Dreyfus Money Market Fund	Jt	2,537
Flemington National Bank	Jt	149
Flemington National Bank	Jt	1,157
Somerset Savings Bank	Jt	1,165
Somerset Savings Bank	S	1,077
Savings Accounts		
Raritan Credit Union	Jt	146
South Shore Bank of Chicago	Jt	1,224
Total, Cash & Bank Accounts		9,334
Other Assets		
Cash Value--Life Insurance Policies		
Connecticut Savings Bank	Jt	2,963
Provident Mutual	Jt	1,702
Loan to Zimmer for Congress Committee	Jt	75,000
Pensions		
Johnson & Johnson		66,312
State of New Jersey		11,050
Personal Property		
Farm Tools & Equipment	Jt	2,750
Livestock: 8 ewes, 1 ram	Jt	1,500
1992 Ford Taurus		13,000
1991 Ford Ranger	S	5,000
Home furnishings & miscellaneous personal property	Jt	45,000
Real Estate		
Delaware Twp, Block 7 Lot 12	Jt	297,800
Note: 1993 assessed val'n = $178,400		
Retirement Funds		
IRA-Dreyfus Growth Opp Fund		11,136
IRA-Dreyfus Third Century Fund 892.13 shares at 8.42	S	13,160
Johnson & Johnson 401k		97,975
State of New Jersey Deferred Comp		99,572
US Govt 401k		15,373
1990 deposit on D.C. apartment	Jt	660
Total, Other Assets		759,952

Zimmer/Goodspeed, Assets & Liabilities, page 2

Investments		
Dreyfus A-Bonds Plus		
321.348 shares @ 14.62	Jt	4,698
Dreyfus Growth Opportunity Fund		
1,052.284 shares @ 13.14	Jt	13,827
Dreyfus NJ Municipal Bond Fund		
122.917 shares @ 13.17	Jt	1,619
Hopewell Township, $10,000 par value		
@ 7%, due 11/01/07	Jt	10,591
Johnson & Johnson Common Stock		
3,382.45 shares @ 50 1/2		170,814
NJ Turnpike Authority, $5,000 par value		
@ 10.375%, due 1/1/03	Jt	6,188
Puerto Rico Electric Power Authority		
due 07/01/04 @ 6.95%		
$30,000 par value	Jt	14,123
State of Israel Bond	Jt	
due 12/01/04 @ 4%		500
Total Investments		222,359
TOTAL ASSETS		991,646
LIABILITIES		
Loans		
Life Insurance Loans		
Connecticut Savings Bank	Jt	1,011
Provident Mutual	Jt	746
Mortgage, First Fidelity Bank		
8-1/4%, due 9/1/2001	Jt	37,053
Stock Loan, Raritan Credit Union		
6.9%, due 12/93		6,573
Total Loans		45,383
Credit Cards		
Diners Club		(185)
Primerica Bank	Jt	1,927
Total Credit Cards.		1,742
TOTAL LIABILITIES		47,125
TOTAL NET WORTH		944,520

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